Medicare Hospital



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MEDICARE HOSPITAL INFORMATION

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Volume 18

KANSAS

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27	MISSOURI	55	TECHNICAL SUPPLEMENT

FOREWORD

The mission of the Health Care Financing Administration (HCFA) is to promote the timely delivery of appropriate, quality health care to the nation's aged, disabled, and poor. The agency must also ensure that beneficiaries are aware of the services for which they are eligible, that those services are accessible, and that agency policies and actions promote efficiency and quality within the total health care delivery system.

To that end, the annual release of the <u>Medicare Hospital Information</u> report is a key element in our continuing efforts to improve the effectiveness of medical practice and the quality of care provided to Medicare beneficiaries. It is also an important step in helping beneficiaries make more informed health care decisions.

The information in this release is not intended as a direct measure of quality of care. It is best used as a "screening tool"—that is, to identify potential problems for further review and, in consultation with medical staff, to evaluate a hospital's strengths and weaknesses. Thus, we believe that consumers can use this information to ask questions of their physicians, rather than reach judgments about the quality of care in a particular hospital. We also expect this information to be used by hospital administrators, physicians, peer review organizations, State survey and certification agencies, and researchers.

This publication presents information to answer the question "What is the actual mortality rate within a certain period of time for each hospital compared to the rate that would have been predicted, given what we know about the characteristics of the patients admitted?" Our basic approach to analyzing hospital mortality information has remained unchanged for the past five years; however, since the last publication of mortality information in May 1991, we have made some significant changes both in our methodology and in the way we display the results of our analysis. The four principal changes in the 1992 report are:

- A graphic presentation of the predicted and observed mortality rates for most hospitals for "All Causes" for Federal fiscal years 1988-1990 at 30, 90, and 180 days;
- The addition of information on certain variables that we use in computing the predicted mortality rates for each hospital;
- The addition of information on the geographic origin of each hospital's patients; and

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- The addition of information on certain variables that we use in computing the predicted mortality rates for each hospital;
- The addition of information on the geographic origin of each hospital's patients; and

• A comparison of the average length of stay in each hospital with the average for the State and Nation.

These refinements should make this information an even more valuable educational tool to help improve the quality of care in hospitals. The changes were reviewed by a panel of outside experts. The methodology used to calculate the observed mortality rate, the predicted mortality rate, and the standard deviation are briefly described in the Technical Information section of the Introduction to this volume and in more detail in the Technical Supplement (Volume 55).

We acknowledge the assistance we have received from the American Hospital Association—not only for providing the information detailing selected hospital characteristics, but also for alerting its members to the importance of this information. We are also grateful to the personnel in each hospital who took the time to review the data thoroughly and to provide us with comments and suggestions. As before, we have published individual hospitals' comments in their respective State volumes. Over the years, these communications have helped to improve and refine the information included in this publication.

HCFA is committed to improving the <u>Medicare Hospital Information</u> report. To that end, we are continuing to work with representatives of hospital, consumer, employer and other organizations to make this annual report as useful as possible for all consumers.

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INTRODUCTION

The <u>Medicare Hospital Information</u> report contains information on acute care hospitals that treated Medicare patients discharged in Federal fiscal year (FY) 1990 (October 1, 1989—September 30, 1990).

This year's publication set consists of 54 State volumes and a Technical Supplement (Volume 55). There is one volume per State, except that California and Texas have two volumes each, Hawaii is combined with American Samoa and Guam, and Puerto Rico and the Virgin Islands are combined together in one volume.

Each hospital's two summary data pages are arranged alphabetically by hospital name in each State volume. These data pages consist of:

- The hospital's FY 1990 Medicare hospital mortality rates;
- A graphic presentation of the predicted and observed mortality rates for most hospitals for "All Causes" for FYs 1988—1990 at 30, 90, and 180 days;
- The FY 1990 values for selected explanatory factors used to predict the mortality rates;
- Origins and lengths of stays of Medicare admissions; and
- Hospital characteristics, such as the number of beds and other characteristics, which we obtained from data contained in the American Hospital Association's (AHA) 1990 Annual Survey of Hospitals files or, when such information was not available from the AHA file, the Health Care Financing Administration's (HCFA) Online Survey, Certification and Reporting System (OSCAR) file.

Please note that the information regarding origins and lengths of stays and hospital characteristics are presented strictly for information purposes only. They were not used to calculate the hospital's predicted mortality rates.

Toward the end of each volume, we include both State and national mortality rates developed by our analysis, as well as the comments we received from individual hospitals.

DESCRIPTION OF MORTALITY INFORMATION

The mortality rates at a given hospital may reflect, among other factors, the age, sex, diagnoses, and severity of illness of patients admitted to that hospital, as well as the quality of care they received. Factors affecting health and the probability of death vary among the patient populations served by individual hospitals. Consequently, the mortality rates in different patient populations vary considerably.

These latest analyses of the mortality rates associated with Medicare hospitalizations are similar to those carried out in the four prior years. Only one hospitalization for every patient was used. As in last year's analysis, when a patient had multiple hospitalizations during the fiscal year, one stay was selected at random to be analyzed. We believe that the use of the randomly selected admission provides a better representation of a typical hospital admission and permits us to calculate mortality rates more nearly like those the hospital itself would calculate for its patients.

Although we publish data only on deaths which occur within 180 days of admission to the hospital, for purposes of analysis our methodology actually considers deaths which occur any time within 365 days of admission (with the exception that no date of death later than April 1, 1991 is used). This is part of the formula which assesses the long-term risk of mortality. With this approach, information about the early and later results of the hospitalization is provided. This is important because diseases evolve with different time courses, and treatments may have different short- and long-term effects. The choice of at least 180 days allows substantial followup consistent with timely reporting of HCFA data.

We again analyzed the data on a fiscal year, rather than on a calendar year, basis because it allows us to report on recent hospitalizations. Also, new Medicare rules are often instituted on a fiscal year basis.

For each hospital, mortality rates are presented for overall Medicare patient mortality and for eight medical conditions and nine procedures. The information consists of the number of Medicare patients; the observed or actual mortality rate (OBS); the predicted mortality rate (PRED), given the mix of patients; and a standard deviation (SD), a measure of the uncertainty of the predicted rate.

The following information will be helpful when reviewing specific information for any given hospital.

Number Of Cases

This is the number of individual Medicare beneficiaries whose discharge in a fiscal year from the short-term, acute care hospital listed was selected for analysis. The total number of cases randomly selected for each hospital is presented under the category "All Causes." The eight medical condition and nine surgical procedure categories are subgroupings drawn from the "All Causes" selection. Although a particular patient may appear in only one of the eight medical condition categories, that same patient may also appear in one or more of the nine surgical procedure categories. Similarly, a patient may appear in one or more of the nine surgical procedure categories, even though he or she was not included in any of the eight medical condition categories.

The categories chosen for display represent HCFA's interpretation of the categories judged to be important by various outside advisors including the Institute of Medicine. The listed condition and procedure categories do not cover the reason for admission of all the hospitalized Medicare patients in this study. (The ICD-9-CM codes included in each condition and procedure category appear in Table 1 following this Introduction section.)

These conditions and procedures represent the causes for the hospital admission and/or surgical episodes during that stay; they do not necessarily represent the cause of death. HCFA does not have access to cause of death information.

Observed Mortality Rate (OBS)

The observed mortality rate for each category is the percentage of each acute care hospital's selected Medicare patients who died within 30, 90, or 180 days of the selected admission. This rate does not represent the percentage whose death was caused by a particular condition or procedure.

The percentage is rounded to the nearest one-tenth of one percent. Both inhospital deaths and deaths occurring after discharge but within 30, 90, or 180 days of admission are included. For example, if a hospital had 1,000 patients included in the "All Causes" category and 124 of these patients died within 30 days of the selected admission, the 30-day observed mortality rate would be 12.4 percent; if an additional 17 patients died more than 30 but less than 91 days after admission, the 90-day observed mortality rate would be 14.1 percent; and if an additional 13 patients died more than 90 but less than 181 days after admission, the 180-day observed mortality rate would be 15.4 percent.

It is important to note that the observed mortality rate is cumulative; e.g., the 90-day observed mortality rate includes all deaths which occur within 30 days of admission, as well as those occurring more than 30 and less than 91 days after admission.

Predicted Mortality Rate (PRED)

The predicted mortality rate for each hospital's patients is derived in part by determining, based on national experience, the contribution to the probability of dying associated with various patient characteristics such as:

- Principal diagnosis (grouped into 23 analytical risk categories),
- Age,
- Sex,
- Previous hospital admissions within the prior six months,
- Admission source (e.g., physician reference, skilled nursing facility reference),
- Admission type (e.g., elective or emergency), and
- The presence of up to seven comorbid conditions—cancer, chronic cardiovascular disease, chronic renal disease, chronic liver disease, chronic pulmonary disease, cerebrovascular degeneration, and chronic diabetes. A list of the ICD-9-CM codes defining the comorbid conditions is in Table 2 following this Introduction section.

Standard Deviation (SD)

The standard deviation is a tool to gauge the extent to which the difference between the observed and predicted mortality rate is meaningful. In general, the greater the difference between the two rates, the greater the probability that the difference represents an actual variation from what would be expected in view of the national experience. The less chance that the difference between the PRED and the OBS can be attributed to statistical variability, the more grounds for possible concern about the institution's performance.

Information on how to use the SD to construct prediction intervals for use in assessing the real difference between the OBS and the PRED is included in the Technical Information section of this Introduction. The precision and interpretability of the estimates are weaker when there are no deaths or 50 or fewer cases in a particular category being analyzed. Thus, for these instances, dashes ("---") are placed in the SD column.

OBSERVED MORTALITY RATE AND PREDICTED RANGE FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

Also in this year's report, we have presented graphs that display the information for most hospitals described above for FYs 1988 and 1989, as well as FY 1990. (In particular, these graphs could not be computed for hospitals that had 50 or fewer cases or no deaths in FYs 1988, 1989, or 1990). In constructing the graphs, we used 2 times the standard deviation to approximate a 95 percent prediction interval. The observed mortality is shown as a dot (•). The predicted mortality is shown at the middle of a range of mortality rates. The bottom of the range is the predicted mortality minus twice the standard deviation, and the top of the range represents the predicted mortality plus twice the standard deviation. The graphs for FY 1988 and FY 1989 are based on new random samples and new computations for this year's report. Thus, the calculations for some hospitals for FY 1988 and FY 1989 may be different from previous releases, because we are including more current data in this year's report.

FY 1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

This year's report includes the FY 1990 average at each hospital of many of the explanatory factors used to predict that hospital's mortality rates. This information provides a profile of the patients used in the analysis and should help to identify possible systematic coding errors in the claims data used to calculate the mortality rates. These percentages are derived from the patients included in the sample and should be applied to the total number of cases listed in "All Causes." It is important to note that neither the admission sources/types nor the comorbidities categories are mutually exclusive. For example, a patient could be both "referred by his personal physician" and "admitted for elective procedure." Similarly, a patient could have secondary diagnoses of both cancer and diabetes.

INFORMATION SOURCES AND NOTES

We believe that when the mortality rate information is properly understood and applied, it can be very useful; it can also be misleading if it is interpreted incorrectly. The information simply describes one of several possible outcomes at a hospital—postadmission mortality for Medicare beneficiaries.

Mortality information is not necessarily representative of a hospital's total performance in all aspects of patient care. Individual hospitals may have very good reasons for their rates being higher than the rates predicted by the HCFA model. For example, one hospital might have different death rates than another because its patient mix is not fully accounted for by the model.

Accordingly, we offered each hospital the opportunity to review their specific information and to provide comments to HCFA and the public, and we included those comments that were received timely at the end of this volume. Users should read the discussions about the uses and limitations of the mortality information found on page xiii, as well as any comments a hospital may have provided.

Hospitals In The Analysis

The hospitals included in this analysis are participating in Medicare as short-term, acute care facilities—all have a zero in the third position of their Medicare provider number. All other hospitals—those with something other than a zero in the third position of their provider number, such as rehabilitation facilities or psychiatric institutions—were excluded. This year, as in the past two years, we have also excluded hospices.

In some cases, we have included data for hospitals that closed, changed ownership, or changed management either during or subsequent to FY 1990. Our data included for those institutions reflects the situation as it existed at the time the hospitalizations analyzed occurred.

Data Sources

This report is based primarily on Medicare hospital billing information for Federal fiscal years 1988, 1989, and 1990. While the principal source of the data for the analysis was the HCFA-maintained Medicare Provider Analysis and Review (MEDPAR) file, which contains information about each Medicare hospitalization, some of the information about beneficiaries, such as date of death, was obtained from the Social Security Administration. Hospitals submit bills to HCFA's fiscal intermediaries (which handle claims for the inpatient care provided to Medicare beneficiaries) which, in turn, submit this information to HCFA. The file is updated on a quarterly basis. Our analysis was based on information available following the June 1991 update of the MEDPAR file. It is estimated that by that time (nine months after the close of the fiscal year), 98 percent of all Medicare discharges in FY 1990 are included in the file.

Possible Limitations Of The Data

In any large-scale data base, such as the one dealing with Medicare hospitalizations, there will be gaps or inaccuracies. For example, last year some hospitals had not accurately reported the source or type of admission, and thus erroneous information was included in the analysis for those hospitals. However, the fact that the files contain information on about 10 million hospital admissions to nearly 6,000 hospitals for each year provides some assurance that, for purposes of the statistical analysis conducted here, the information that might be

missing or inaccurate is such a small portion of the total that it would have little effect on the results for national estimates. Nevertheless, it may substantially affect an individual hospital if it were the source of the inaccurate information.

While we feel that the information used in this analysis is thorough and complete, there are a few points to keep in mind as you review the mortality information.

The information used is billing data; it is only as good as the information submitted by hospitals as part of the payment process. Although there is always a possibility that coding errors are included, we assume that, given the link to payment, hospitals have an incentive to submit bills accurately and promptly. We do know, however, that some hospitals submitted incomplete or erroneous data.

For example, following last year's public release of the hospital mortality data, several hospitals wrote to HCFA indicating that they had submitted incorrect data. Furthermore, they stated that if they had given us the correct information, their predicted mortality rates would have been higher than those presented in HCFA's report. Therefore, in this year's report we have annotated those hospitals' data pages with a footnote stating: "This hospital says that it submitted inaccurate data to Medicare and claims that its predicted mortality rate should be higher than that presented above." At this point, however, HCFA cannot confirm the validity of those hospitals' claims. The analysis results might very well be different if the data on which they were based were submitted accurately by those hospitals.

In our previous analysis of mortality data, we discovered that some States had zero admissions from a skilled nursing facility. While some of these problems were corrected on the MEDPAR files used for this analysis, at the time this study was initiated we found empirical evidence that some of the files still contained suspect information. The suspect data were identified by noting those months (date of discharge) and fiscal intermediaries for which the type and source of admission fields appeared to be interchanged. Based on our findings, we reversed these fields to at least partially correct the remaining discrepancies. The following list shows the specific instances for which the fields were reversed for this analysis.

TYPE AND SOURCE OF ADMISSION FLIPPED

FI No.	FI Name	<u>Dates</u>
00030	Arizona Blue Cross	10/01/86 — 12/31/88
08000	Maryland Blue Cross/DC	06/01/87 — 09/30/87
00190	Maryland Blue Cross	06/22/87 — 12/31/88
00400	Texas Blue Cross	12/07/87 — 12/31/88

HOW TO USE THIS INFORMATION

There are several key points to remember about the use of this information. First, it is important to understand that the difference between the hospitals' mortality rates and the predicted rates in the tables in this report may not be a direct measure of the quality of care rendered in the hospitals.

Second, the usefulness of this information depends upon the accuracy with which mortality rates can be predicted. We do not currently have any direct measurement tool with which we can fully adjust for severity of patient illness differences among hospitals. For instance, two hospitals may have very different death rates for patients admitted for stroke, even after we have adjusted for age, sex, and several other factors. This might happen because one hospital's stroke patients may consist of a significant number who are admitted in a coma (and are thus more likely to die), whereas another hospital's patient population may represent a broader spectrum of patients with cerebrovascular problems, or because these two hospitals, in fact, do provide different levels of quality of care. In addition, other factors affecting the probability of death in a particular case (e.g., family status/support, overall health status of the patient, etc.) are not included in the predictive model because information on them is not readily available.

Nevertheless, we believe that the information presented in this publication is an important contribution to the health care community and should be helpful to a wide range of individuals and organizations including consumers, hospital administrators, physicians, PROs, and researchers.

Use By Consumers — Some Key Questions

Consumers should read carefully the explanations of the uses and limitations of the information. Listed below are some questions that we recommend a consumer think about before choosing a hospital. Please keep in mind that this is not a comprehensive list, but it should serve to illustrate the types of questions that are important to consider.

- Why are the hospital's observed mortality rates for "All Causes" consistently and significantly above the predicted rates for FY 1990?
- Why are the hospital's observed mortality rates for the condition for which I need treatment or the procedure I will undergo consistently and significantly above the predicted rates for FY 1990?
- How does this hospital's pattern of mortality compare with that of other hospitals in the State and Nation?

- Is the number of cases too small to present a satisfactory picture of the hospital?
- Does the hospital treat a large number of cases in the category for which I need treatment?
- Does the hospital treat a large number of patients who have several co-existing illnesses or who otherwise are likely to be "sicker" than average?

Other Users Of This Publication

Among other users of this publication, we expect that the hospital administrator (in consultation with medical staff) will find the information most useful as a screening tool to evaluate a hospital's strengths and weaknesses. We know that some hospitals and their medical staffs, using established and newly emerging quality assessment techniques, are seeking information that will result in improved health care delivery.

Outside Assistance In Developing This Publication

The development and presentation of the Medicare Hospital Information report continues to be an important part of HCFA's responsibilities in the health care community. To make the information as accurate and useful as possible, over the past several years we have discussed the theoretical framework and statistical approach with a number of nationally recognized technical experts in appropriate fields. Based on their recommendations, we believe that the models used in these analyses continue to be reasonable and appropriate.

In the past, we have conducted validation studies of our methodology. In general, these studies have found correlation between poor quality care and hospitals whose observed mortality rates significantly exceed the rates that would have been predicted. However, we have also found that detailed clinical data which more thoroughly characterize the severity of patient's illness, while they do not materially affect results describing the general pattern of mortality, do, in specific instances, alter our assessment of the comparison of the observed to the predicted mortality rates.

The format for presentation, the process for sharing the information with individual hospitals, and the statistical methodology have been discussed at various meetings with leaders of organizations representing Medicare beneficiaries, physicians, and hospitals. Also, we have spent many months reviewing the comments received from the hospitals regarding their patient-specific data for earlier years and our previous mortality information reports. Many suggestions from these sources have been incorporated into this report.

We have carefully investigated comments from individual hospitals on apparent discrepancies or errors generated in previous years. These discrepancies rarely had an effect on a hospital's overall mortality rate. Most of these instances fell into the following two broad categories.

- Inaccurate Date of Death We found that inpatient billing coding errors (e.g., a hospital bill indicating that the patient's status at time of discharge was "expired" when the patient had, in fact, left the hospital alive) created many of these errors. We now have mechanisms in place that allow a continuous update of HCFA's master file, thereby enabling us to make corrections.
- Discrepant Case Counts Our analysis counts only one acute care discharge in a fiscal year; normally, hospitals count each discharge. Thus, a patient admitted three times in a year would count three times for the hospital, but only once for the purpose of analyzing Medicare hospital mortality data presented in this report.

We believe it is important for consumers of health care to have access to as much information about hospitals as possible when making health care choices. Along with hospital characteristics information, we have added this year information about the origin and length of stay of Medicare admissions. This information is presented for comparative purposes only and was not used in calculating a hospital's predicted mortality rates. These data were not part of the analyses, and any errors or discrepancies in them do not affect the predicted mortality rates.

ORIGIN OF MEDICARE ADMISSIONS

Data on the geographic origin of each hospital's patients are presented in this year's report. We obtained from the Health Insurance Master file the State and county of residence for each Medicare beneficiary discharged from a Medicare-certified, acute care hospital during FY 1990. We then compared that information with the location of the hospital to determine the percentage of all discharges where the patient lived within the same city/county as the hospital location, within the State where the hospital is located, or outside the State. The percentages are derived by dividing the number of discharges of beneficiaries in a geographic category by the total number of Medicare discharges from the hospital. Please note that these are percentages of total Medicare discharges, not of the mortality sample alone.

MEDICARE AVERAGE LENGTH OF STAY

We obtained from the MEDPAR file the total days of care—both Medicare covered and noncovered—and divided that total by the number of discharges from each hospital. Total, rather than covered, days were used because, under the Prospective Payment System (PPS), if a Medicare patient has at least one day of hospital coverage available to him in the current spell of illness, the hospital will be paid the full diagnosis related group (DRG) amount plus any approved outlier amount, regardless of the number of days actually used.

Example: Hospital A had 2,513 Medicare discharges with a

total of 24,379 days.

Calculation: 24,379 = 9.7 days

2.513

The Medicare average length of stay is 9.7 days.

HOSPITAL CHARACTERISTICS

As noted previously, we have again included information on selected hospital characteristics such as the number of beds, occupancy rate, ownership, staffing, and specialty services. This information was obtained from the American Hospital Association's (AHA) 1990 Annual Survey of Hospitals, with the exception of the case mix index (CMI), which was derived from HCFA billing data. This file consists of information voluntarily reported by hospitals to the AHA. In instances where AHA data were unavailable, for example for hospitals that did not respond to the AHA survey, we derived the information from HCFA's Online Survey, Certification and Reporting system (OSCAR). The hospital characteristics and the specific special services listed were selected with the concurrence of the AHA as being those most meaningful to the Medicare population. Information on these specific data elements follows.

AHA Definitions (except for CMI)

Survey and Year — AHA 1990. Source is the American Hospital Association's 1990 Annual Survey of Hospital files.

Profile

Total beds (#) — Number of beds (including subacute beds), cribs, and pediatric and neonatal bassinets regularly maintained (set up, staffed, and ready for use) for inpatients as of the close of the reporting period; does not include bassinets for normal newborn infants.

Occupancy rate (percent) — Ratio of average daily census to the average number of beds (statistical beds) maintained during the 12-month reporting period. (NOTE: The number of these "statistical beds" may differ from the bed count at the close of the reporting period.)

Ownership/control — State government, local government, district/authority, church, private nonprofit, private for profit, or Federal Government.

Medicare discharges — The total number of inpatient discharges for Medicare patients for those hospitals selected for the mortality calculations, including all discharges for persons with more than one hospitalization during the year. (The mortality data include only one randomly selected discharge for each hospitalized enrollee. Therefore, this figure may reflect more discharges than the actual number of cases randomly selected for the mortality study.)

Case mix index (CMI) — A measure of the overall complexity of the Medicare cases treated by a given hospital compared to the complexity of the national average case mix. The CMI represents the relative costliness of each hospital's mix of cases compared to the national average mix of cases. A CMI of greater than one means that a hospital treats more complex cases than average. A CMI of less than one means that a hospital treats less complex cases than average. The CMI for each hospital is calculated on an annual basis. In this report, the CMI presented for each hospital is calculated based on its discharges in FY 1990.

A hospital's CMI is calculated by multiplying the number of cases in each DRG by the relative weight of that DRG, summing the products, and dividing the sum by the total number of cases for the year. For calculating the FY 1990 CMI, use the DRG relative weights published in the *Federal Register*, Volume 54, Number 169, pages 36468 ff., dated September 1, 1989.

Staffing (all AHA counts are as of 9/30/90)

Total number of physicians — Total active and associate medical staff.

Percent of physicians who are board-certified specialists — Physicians who have passed an examination given by a medical specialty board and have been certified by that board as a specialist.

Medical residents/interns — Full-time equivalent (FTE) medical residents or interns.

Registered nurses — Full-time equivalent (FTE) registered nurses.

Licensed practical nurses — Full-time equivalent (FTE) licensed practical nurses.

Specialty Services

Burn Unit — Provides more intensive care to severely burned patients than the usual acute nursing care provided in medical and surgical units. Beds must be set up and staffed in a unit specifically designated for this service.

Cardiac Intensive Care — Provides patient care of a more specialized nature than the usual medical and surgical care, on the basis of physicians' orders and approved nursing care plans. The unit is staffed with specially trained nursing personnel, and contains monitoring and specialized support or treatment equipment for patients who, because of heart seizure,

open-heart surgery, or other life-threatening conditions, require intensified, comprehensive observation and care. May include myocardial infarction, pulmonary care, and heart transplant units. Beds must be set up and staffed in a unit(s) specifically designated for this service.

Comprehensive Geriatric — Provides diagnostic and evaluation services that determine elderly patients' long-term care needs. It includes the assessment of medical conditions, functional activities, and mental and emotional conditions, and incorporates these into a treatment plan which includes family and financial concerns as well as medical needs.

Hospice Care — A program providing primarily medical relief of pain and support services to terminally ill patients and assistance to their families in adjusting to the patients' illness and death.

Medical/Surgical Intensive Care — Provides nursing care to adult and/or pediatric patients of a more intensive nature than the usual medical, surgical, pediatric, and/or psychiatric care on the basis of physicians' orders and approved nursing care plans. Included are medical-surgical, pediatric, and psychiatric (isolation) units. These units are staffed with specially trained nursing personnel, and contain monitoring and specialized support equipment for patients who, because of shock, trauma, or life-threatening conditions, require intensified, comprehensive observation and care. These units may also include cardiac care when such services are not approved in a distinct cardiac care unit. This category is called "intensive care unit" in OSCAR.

Organ/Tissue Transplant — The hospital has the necessary staff and equipment to perform the surgical removal of a viable human organ or tissue from a donor, either living or deceased, and the surgical grafting of the organ/tissue to a suitably evaluated and prepared patient.

Other Intensive Care — Provides nursing care to adult and/or pediatric patients with a specialized disease or condition of a more intensive nature than the usual medical, surgical, pediatric, and/or psychiatric care on the basis of physicians' orders and approved nursing care plans. Examples reported include oncology or spinal cord injuries. These units are staffed with specially trained nursing personnel and contain monitoring and specialized support equipment appropriate for the patients' specialized conditions.

Trauma Center — Provides emergency and specialized intensive care to critically injured patients.

Other Specialty/Hospital-Based Services

Alcohol/Drug — Hospital services for the medical care and/or rehabilitative treatment of outpatients whose primary diagnosis is alcoholism or other chemical dependency.

Rehabilitation — A unit having designated beds and providing a comprehensive array of multidisciplinary medical rehabilitation services.

Psychiatric — Care provided to emotionally disturbed, chronically mentally ill, mentally disordered, or other mentally incompetent patients on the basis of physicians' orders and approved nursing care plans. Beds must be set up and staffed in units specifically designated for this service.

Medicare Swing Beds — The hospital is certified by Medicare to provide "swing bed" services; that is, some acute care beds can be used for skilled nursing facility type care in the hospital for Medicare purposes.

OSCAR Definitions (except for CMI)

Survey and Year — HCFA, most recent year. Data were derived from the Online Survey, Certification and Reporting System (OSCAR).

Profile

Total beds (#) — Total number of operational beds eligible for Medicare payment.

Ownership/control — Church; private, nonprofit; other nonprofit; proprietary; Federal Government; State government; local government; and hospital district or authority.

Case mix index (CMI) — See definition shown in AHA "Profile" section.

Staffing

Medical residents/interns — Full-time equivalent (FTE) medical residents or interns.

Registered nurses — Full-time equivalent (FTE) registered nurses.

Licensed practical nurses — Full-time equivalent (FTE) licensed practical nurses.

Specialty Services

NOTE: There are no specific definitions of specialty services in OSCAR. Characteristics are self-reported by each hospital at initial Medicare certification and recertification, and are generally understood to parallel the explicit AHA definitions (above). The AHA categories "comprehensive geriatric" and "other intensive care" are not available in OSCAR. However, they may be included in the OSCAR category of other specialty services (not shown in table).

Coronary Care — See definition shown in AHA "Specialty Services" section.

Intensive Care Unit — See definition shown in AHA "Specialty Services" section. These units may also include other intensive care units in OSCAR reporting.

Organ Transplant — See definition shown in AHA "Organ/Tissue Transplant" section. May include tissue transplants because there is not a separate field in OSCAR for these services.

TECHNICAL INFORMATION

DATA SOURCES

The data analyzed in this report are obtained from the Medicare Provider Analysis and Review (MEDPAR) file for the fiscal years 1987-1990, which contains information on the hospital stays of Medicare beneficiaries. The principal sources of data for this file are the bills (known as HCFA-1450 or UB-82) submitted by the hospitals to HCFA through fiscal intermediaries. The MEDPAR file also contains data about the beneficiaries, such as age, sex, and date of death, which are obtained from the Social Security Administration, the Railroad Retirement Board, or the Office of Personnel Management.

Hospital stays with discharges in fiscal years 1988, 1989, and 1990 were used in these analyses. Hospital stays in 1987 were used only to characterize the prior admissions of the patients in the 1987 cohort. Only acute care hospital stays in short-term (general and specialty) hospitals were selected. These hospitals have a "0" in the third position of their Medicare provider number. Hospital stays in institutions (designated by a "9" in the fourth position of the provider number) and hospital stays in psychiatric units, rehabilitation units, swing-beds and alcohol/drug units (with "special unit codes" of S, T, U and V, respectively, in the third position) were excluded.

THE MORTALITY MODEL

For each beneficiary in each year one hospitalization was selected at random. Choosing a specific hospitalization is necessary to avoid multiple counting of the same death for that year. Selecting a random hospitalization instead of the first or last in the year produces mortality rates that are more representative of the rates that a hospital might calculate for its patients. Also, the mortality rates based on this random selection process reflect an intermediate position between the rates produced by the alternatives.

The selected hospital stays were analyzed separately by analytical category. The analytical categories were created by grouping ICD-9-CM diagnosis codes that had similar mortality patterns. The procedures for creating the analytical categories and the groups of ICD-9-CM diagnosis codes that defined them are detailed in the Technical Supplement.

The mortality experience of the patients was evaluated as a function of time within 365 days of the admission. The factors included in the mortality model used to evaluate each patient's probabilities of death are given in Table 3. They consist of demographic characteristics (age and sex), major comorbidities (chronic diseases likely to have been present at admission and believed to

complicate management and increase the likelihood of an adverse outcome), prior admissions (grouped into five risk or severity levels) within the 6 months preceding the admission evaluated, admission type (emergent, elective, etc.), and admission source (referral from the physician's office, the nursing facility, etc.). The specific reason for the admission (the principal diagnosis) and the performance of selected surgical procedures were additional factors used in the estimation of the predicted probability of death (see below).

The observed mortality rate for a hospital was calculated by means of the lifetable method ("The LIFETEST Procedure," Chapter 22, <u>SAS User's Guide: Statistics</u>, Version 5 Edition, pages 529-557).

ANALYTIC TECHNIQUES

A time-to-event or survival model with explanatory or concomitant variables was used to ascertain the influence of the patient characteristics listed above on the probability of death. A feature of such a model is allowance for "right censored" observations. Generally, these are events or outcomes which would have occurred but for some interference that prevents further observation. In the present analysis, "right censoring" occurs when a patient is withdrawn alive from the study April 1, 1991 or at the end of the followup period of 365 days.

The survival function, S(t), is one of several equivalent ways of expressing the model. Another form uses the cumulative distribution function or the mortality function

$$F(t) = 1 - S(t)$$
.

Another useful formulation of these models is the hazard function, h(t), also known as the force of mortality or risk function. The hazard is the rate of decrease in the number of survivors relative to the number of survivors at a specific time. Mathematically, the hazard function is

$$h(t) = -\frac{1}{S(t)} \frac{dS(t)}{dt} = -\frac{d \ln(S(t))}{dt}$$

The probability density function, f(t), commonly used in statistical texts can be expressed as follows:

$$f(t) = \frac{dF(t)}{dt} = h(t)S(t).$$

The area under the survival curve is the expected value for t. In some cases, the area under the survival curve is restricted to an interval 0-t₁ where t₁ might be one year, for example.

The specific time-to-event or survival model used in the present analysis is Bailey's modification of the Makeham model. The survival function for the Bailey-Makeham model is

$$S(t) = \exp\left\{-\delta t - \left(\frac{\alpha}{\gamma}\right)(1 - \exp(-\gamma t))\right\}$$
where
$$\alpha = \exp(\alpha_0 + \alpha_1 x_1 + \dots + \alpha_i x_i + \dots + \alpha_k x_k)$$

$$\gamma = \exp(\gamma_0 + \gamma_1 x_1 + \dots + \gamma_i x_i + \dots + \gamma_k x_k)$$

$$\delta = \exp(\delta_0 + \delta_1 x_1 + \dots + \delta_i x_i + \dots + \delta_k x_k)$$

are the expressions for each of the structural parameters α , γ , and δ in terms of the k concomitant variables x_i and their associated component parameters α_i , γ_i , and δ_i for i=1, 2,..., k and three intercepts or component parameters α_0 , γ_0 , and δ_0 . The structural parameter δ is the long-term risk which is approached as $t\rightarrow\infty$. The structural parameter α is the initial excess risk which decays with rate constant γ .

For the survival function given above, the risk or hazard function has an especially tractable form of an exponential decay which approaches a long-term risk, δ . The hazard function corresponding to the survival function above is

$$h(t) = \alpha \exp(-\gamma t) + \delta.$$

The estimation of the component parameters was carried out in a series of steps in which those covariates which had estimable and statistically significant (p<0.05) influences of the probability of death were identified for inclusion in the model. As the model for each of the 23 risk categories was estimated separately, different lists of covariates were used for the final core models.

This first step was followed by the estimation of the additional contribution of specific principal diagnoses in each risk category. In these analyses, the effects of the patient characteristics included in the core models were corrected for. Only those principal diagnoses were retained which were estimable and had more than 900 cases (more than 300 for codes identified by year). Similarly, after adjustment for the effects of both the variables in the core model and the principal diagnoses, correction terms were calculated to estimate the additional information about the probability of death associated with the categorization of the patients into the clinical groups used for the presentation of the data in the mortality tables (see below). These correction terms were negligible for the medical categories but substantial for the surgical categories.

Once the component parameters or regression coefficients α_i , γ_i , and δ_i have been estimated, the predicted probability of patient death at any specified time after admission, 1-S(t), may be calculated for all individuals. To obtain the predicted mortality rate up to a given time for a hospital, it is then only necessary to average over the predicted probabilities of death of its patients to that time.

The analytical categories are useful for grouping the patients into relatively risk-homogeneous strata for the regressions. However, to gain insights into patterns of practice at hospitals, the data are presented for patients grouped into clinically meaningful medical and surgical categories. The 17 clinical categories used in the mortality tables and defined in Table 1 were identified by the Institute of Medicine as being of particular medical and epidemiologic interest.

ESTIMATION OF THE STANDARD DEVIATION FOR PREDICTED MORTALITY

The standard deviation of the predicted mortality rate is used to assess how statistically different the observed mortality rate is from the rate predicted by the national experience with like patients. The standard deviation depends, in fact, on the variance of the residual or the difference between the observed, \hat{P} , and predicted, $\hat{\Theta}$, mortality rates.

The residual has four components V_1, V_2, V_3 , and V_4 where V_1 is the variance of the estimate of the predicted probability of death. This computationally intensive term was negligible for nearly all cases, compared to other components of variance. Consequently, this term was not included in the present analysis.

 V_2 is the binomial variance for n patients

$$V_2 = \frac{\widehat{\Theta} \left(1 - \widehat{\Theta}\right)}{n}.$$

 V_3 is the variation among hospitals not explained by the mortality regression models containing the patient characteristics described above.

$$V_3 = \widehat{\text{Var}(\Theta)} = (1 - \frac{1}{n}) \widehat{M_2(\Theta)}$$

where

$$\widehat{M_2(\Theta)} = \left\{ \begin{pmatrix} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics and} \\ \text{adjustment for hospital effects} \end{pmatrix} - \begin{pmatrix} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics,} \\ \text{but omitting the hospital specific effects} \end{pmatrix} \right\}^2 \left(\frac{1}{z_p^2} \right)$$

The quantity z_p corresponds to the statistical significance (p-value) of the hospital-specific effect.

 V_4 is the variation not explained by the mortality regression models which each include, in addition, an indicator variable for the hospital:

$$V_4 = \left\{ \left(\text{Observed mortality} \right) - \left(\begin{array}{c} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics, and} \\ \text{adjustment for the hospital specific effects} \right) \right\}^2$$

(The regression coefficients of the indicator variable for the hospital are a measure of the influence on the probability of patient death of factors not otherwise specified in the model. These factors include severity of illness not adequately reported on by the patient characteristics deduced from the claims data and the hospital's pattern of practice; i.e., performance.)

The standard deviation given in the mortality tables is just

$$SD = \sqrt{V_2 + V_3 + V_4}$$
.

STANDARDIZED MORTALITY RATIO (SMR)

Another method of evaluating a hospital's performance—the Standardized Mortality Ratio (SMR)—is obtained by dividing the observed mortality rate by the predicted mortality rate. An SMR of one means the observed and predicted mortality are equal. A ratio greater than one means the observed mortality exceeds the predicted. A ratio less than one means the observed mortality is less than expected. The more extreme the ratio (significantly greater than one indicating unusually high mortality and significantly less than one indicating unusually low mortality), the greater the attention which should be paid to the results of this mortality report.

For each of the conditions and procedures, selected percentiles for the observed distribution of the SMR are displayed in Table 4. The selected percentiles provide benchmarks for comparison. For example, for a hospital

with 300 cases in the "All Causes" category, with observed mortality of 12.2 percent and predicted probability of 10.0 percent at 30 days, the standardized mortality ratio is

SMR = 12.2/10.0 = 1.22.

Note that an SMR of one means the observed and predicted mortality are equal, while a ratio greater than one means the observed mortality exceeds the predicted, and a ratio less than one means the observed mortality is less than expected. There will be greater interest in the more extreme ratios, either greater than one — excessively high mortality — or less than one — extremely low mortality.

From Table 4 for FY 1990, we find that the ratio is just below the 75th percentile of 1.23. Hence, slightly under 75 percent of the hospitals have an SMR less than that found at this hospital.

However, for a hospital with 900 cases in the "All Causes" category, with observed mortality of 19.3 percent and predicted probability of 10.0 percent at 30 days, the standardized mortality ratio is

SMR = 19.3/10.0 = 1.93.

Since the SMR of 1.93 is greater than the 97.5 percentile of 1.35 (Table 4 for 750 or more cases), there is cause for concern. To further assess this, we examine the displayed data in terms of the measure of uncertainty, the standard deviation.

MEASURES OF UNCERTAINTY

In principle, to use the standard normal approximations to determine prediction intervals, an adjustment must be applied for the skewness and kurtosis inherent in a mortality rate when the rate is considerably less than 50 percent and the number of cases is small. Table 5 presents the multiplicative factors, based on the binomial distribution, for the standard deviation needed to construct prediction intervals for the mortality rates at confidence levels of 75, 95 and 99 percent. Because of the approximations involved in the estimation of the skewness and kurtosis corrections, their precision decreases as the number of cases and the mortality rate decrease; i.e., as the value of the correction increases. In addition, because of simplifications and approximations in the estimation of the standard deviation, the precision of the multiplicative factors given in Table 5 exceeds the precision of the estimate of the standard deviation. Hence, the following rule-of-thumb represents an adequate approximation to the factors in Table 5 and an adequate guide to the statistical meaningfulness of the difference between the observed and the predicted mortality rates.

To illustrate the use of Table 5, consider a hospital with 75 cases and a predicted mortality of 13.0 percent with a standard deviation of 5.0 percent. Overall, for hospitals with patients with characteristics similar to those of this hospital, we would expect the actual or observed mortality rate to lie, 95 percent of the time, either between 13.0 percent and 22.9 percent if the actual is larger than the predicted, or between 3.3 percent and 13.0 percent if the actual is less than the predicted. That is because 22.9 percent = 13.0 percent + 1.98 x 5.0 percent, the factor 1.98 having been read from the section of Table 5 with the heading "95 Percent Prediction Interval" and "Factor for Upper Bound," the row "75" for the number of cases, and, by interpolation, between the "10 percent" and the "20 percent" predicted mortality rate columns. Similarly, 3.3 percent = 13.0 percent - 1.94 x 5.0 percent, the factor -1.94 having been read from the section of Table 5 with the heading "95 Percent Prediction Interval" and "Factor for Lower Bound" and the corresponding row and columns.

Therefore, in comparing the actual and predicted rates, more attention should be given to the hospital whose observed mortality rate lies beyond the bounds calculated for the 99 percent prediction interval than to the hospital whose observed mortality rate lies only beyond the bounds calculated for the 95 percent prediction interval. Likewise, more attention should be given to that hospital than to the hospital whose observed mortality rate lies only beyond the bounds calculated for the 75 percent prediction interval.

For the graphs, the observed mortality and an approximate 95 percent prediction interval are displayed. The prediction interval has bounds at the predicted mortality plus 2 times the standard deviation and at the predicted minus 2 times the standard deviation.

In the mortality rate tables, the observed and predicted mortality rates and the standard deviation as a measure for statistical importance of the difference are displayed for the overall and each of the conditions and procedures.

HOW TO OBTAIN MEDICARE HOSPITAL INFORMATION

The publication has been widely distributed to State health organizations and hospital and medical associations. The publication is available to the public for purchase in 55 volumes, with each volume being sold separately through the Government Printing Office (GPO). More detailed information about the purchase of this publication may be obtained by contacting:

> Superintendent of Documents Government Printing Office Washington, D.C. 20402 Telephone: (202) 783-3238

As in prior years, the information appearing in the Medicare Hospital Information report is available in machine-readable/electronic format (tape and diskette). The Medicare Hospital Information public use file provides the published information as contained in the 55-volume hardcopy publication, except that the AHA's hospital characteristics are not on this file. Hospital characteristics from HCFA files (OSCAR) are provided instead. The files contain additional information which is useful for supplemental analyses: averages by hospital, MSA, and State for each of the variables used in the model, mortality rates for 15, 30, 60, 90 and 180 days, and cross-reference files which relate State, MSA, and ICD-9-CM codes used to a name. These data should allow analysts to assess an individual hospital's performance in comparison to all hospitals in the State or applicable MSA.

Also available to hospitals in machine-readable format is their patientspecific data that were used in the report. These data include the patient variables used in the analysis (e.g., the number and severity level of prior hospitalizations considered by the methodology, admission source and type, etc.) and the predicted probability of death at each time interval for each individual included in the study. With these data it is possible for hospitals to better understand their statistics. Due to confidentiality considerations, requests for patient-specific data must be forwarded on hospital letterhead, must include the institution's Medicare provider number, and must be signed by the hospital administrator.

For information about obtaining Medicare Hospital Information electronic media data, please contact HCFA's Bureau of Data Management and Strategy at:

> Health Care Financing Administration Bureau of Data Management and Strategy Office of Statistics and Data Management 3-A-10 Security Office Park Building 6325 Security Boulevard Baltimore, Maryland 21207

Telephone: (410) 597-5151

Table 1

DIAGNOSTIC AND PROCEDURE CATEGORIES

The following lists the ICD-9-CM diagnostic and procedure codes used to classify and group patients for presentation

CONDITION/PROCEDURE

ICD-9-CM CODES

(D)=Diagnosis code (P)=Procedure code

Heart Disorders/Procedures

Acute Myocardial Infarction (AMI)

All of 410 (D) (on 10/1/89 exclude 410

with 5th digit of a 2)

Note:

For code 410 a 5th digit was added on October 1, 1989.

Congestive Heart Failure

(CHF)

398.91, 402.01, 402.11, 402.91, 428.0,

428.1, 428.9 (all D)

Angioplasty (ANGPLSTY)

All of 36.0 (P) excluding 36.00, 36.03,

36.04, 36.09 (all P)

Note:

Code 36.0 had a 4th digit added on October 1, 1986. Code 36.0 got digits of 0, 1, 2, 3, and 9, and code 36.04 got some previously coded cases of 39.97. On October 1, 1987, code 36.01 was divided into 36.01 and 36.05, and some cases from 36.02 were put into 36.05.

Coronary Artery Bypass Graft (CABG)

All of 36.1(P) and not Angioplasty (see

above)

Pacemaker Insertion, Initial (PACE)

37.73, 37.74, 37.75, 37.77 (after 10/1/87 use 37.70 through 37.73) (all P)

Note:

Code 37.70 was restructured on October 1, 1987. Previously the code contained both leads and devices. On October 1 these were separated and devices were coded as 37.80 through 37.83, and codes for the leads were changed into various 37.70 codes.

CONDITION/PROCEDURE

ICD-9-CM CODES (D)=Diagnosis code (P)= $Procedure\ code$

Pulmonary Disorders

Pneumonia/Influenza

(PNU)

All of 480, all of 481, 482.2, 482.3, 482.9, 483, 485, 486, 487.0 (all D)

Chronic Obstructive Pulmonary

(COPD)

All of 491, all of 492, all of 494, Disease all of 496; and 466.0, 518.82, 518.5, and 786.09 when there is a secondary diagnosis of any 496 (all D)

Code 518.8 got a 5th digit on October l, 1987. Some Note:

cases from 799.1 were put into codes 518.81 and

518.82.

Cerebrovascular Disorders/Procedures

Transient Cerebral Ischemia 433.1, 433.3, 435 (D) and exclude those (TCI)

patients with an endarterectomy at the

time of admission—38.12(P)

Stroke 431, 434 through 434.9, 436 (all D)

(STK)

Carotid Endarterectomy 38.12 (P) with 433.1 (D); 433.3 (D) or

435(D) as a principal diagnosis (ENDART)

Musculoskeletal Disorders/Procedures

Fracture of Neck of Femur All of 820 (D)

(FXHIP)

Hip Replacement/Revision 81.5, 81.6 (exclude 81.69) (all P). On

(HIPREP) 10/1/89 code 81.51 (P) through 81.53

(P) with same diagnoses.

Open Reduction of Fractured Femur 79.35(P) on condition of 820 (D) as

principal diagnosis (OPRDUX)

CONDITION/PROCEDURE

ICD-9-CM CODES

(D)=Diagnosis code (P)=Procedure code

Genitourinary Disorders/Procedures

Prostatectomy (PROS)

60.2, 60.3 through 60.69 (all P)

Hysterectomy (HYS)

68.3 through 68.7 (P)

Gastrointestinal Disorders/Procedures

Cholecystectomy (CHOLOTMY)

51.22 (P)

Sepsis

Sepsis

003.1, 020.2, 022.3, 036.2, 036.3, 036.89, 036.9, 038.0, 038.1, 038.2, 038.3, 038.40, 038.41, 038.42, 038.43, 038.44, 038.49, 038.8, 038.9, 054.5

Table 2

COMORBIDITY CONDITIONS (all are D codes)

COMORBIDITY	ICD-9-CM CODES
Cancer	141-160.9, 162-172.9, 174-208.91
Chronic cardiovascular disease	412-414.9, 426-429.1
Chronic liver disease	571-572.8
Chronic renal disease	582-583.9, 585-587, 403.01, 403.11, 403.91, 404.02, 404.03, 404.12, 404.13, 404.92, 404.93
Chronic diabetes	250.01, 250.1-250.91
Chronic pulmonary disease	491-493.91, 496
Cerebrovascular degeneration	290-290.9, 294-299.9

Table 3

EXPLANATORY VARIABLES FOR THE MORTALITY MODEL

Generally the same variables are used for all diagnostic categories.

Demographics

SXFM An indicator variable: = 1 if Female, 0 otherwise

AGEFM = AGESP if SXFM = 1, 0 otherwise AGEML = AGESP if SXFM = 0, 0 otherwise

where

AGESP = sign (W-65)
$$\left(\frac{W-65}{65}\right)^{1.44}$$

and

$$W = \begin{cases} 23 \text{ if } AGE \le 23 \\ AGE \text{ if } 23 < AGE < 100 \\ 100 \text{ if } 100 \le AGE \end{cases}$$

Comorbidities

ICD-9-CM Codes

(Indicator variables = 1 if comorbidity present on current or prior admission with discharge within 6 months prior to current admission, 0 otherwise)

CCA	Cancer	141-160.9, 162-172.9, 174- 208.91
CCV	Chronic cardiovascular disease	412-414.9, 426-429.1
CLV	Chronic liver disease	571-572.8
CRN	Chronic renal disease	582-583.9, 585-587, 403.01, 403.11, 403.91, 404.02, 404.03, 404.12, 404.13, 404.92, 404.93
CDI	Chronic diabetes	250.01, 250.1-250.91
COP	Chronic pulmonary disease	491-493.91, 496
CCE	Cerebrovascular degeneration	290-290.9, 294-299.9

Co Occurrence of Comorbidities

COP_CCV	1 if $COP = 1$ and $CCV = 1$, 0 otherwise
CCA_CCV	1 if $CCA = 1$ and $CCV = 1$, 0 otherwise
COP_CCA	1 if $COP = 1$ and $CCA = 1$, 0 otherwise
CCE_CCV	1 if $CCE = 1$ and $CCV = 1$, 0 otherwise
CRN_CCV	1 if $CRN = 1$ and $CCV = 1, 0$ otherwise

Admission Sources and Types

(Indicator variables = 1 if source or type present, 0 otherwise)

PREF	Patient referred by personal or HMO physician
TRSNF	Patient transferred from skilled nursing facility
ELCT	Patient admitted for elective procedure
EMRG	Patient admitted for emergency

Co-Occurrence of Admission Source and Type

PREF_ELEC = 1 if PREF = 1 and ELCT = 1, 0 otherwise

Previous Hospitalizations

P_RISK1	Number at 1st risk level with 3 or more set to 3
P_RISK2	Number at 2nd risk level with 3 or more set to 3
P_RISK3	Number at 3rd risk level with 3 or more set to 3
P_RISK4	Number at 4th risk level with 4 or more set to 4
P_RISK5	Number at 5th risk level with 3 or more set to 3
F(T)	Probability of death from previous admission if discharge within 182 days of current admission, 0 otherwise

Time Trend

FLAG89	1 if discharge in FY1989, 0 otherwise
FLAG90	1 if discharge in FY1990, 0 otherwise
INYEAR	Difference between current admission date and April 1 of fiscal year of discharge

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1990

	NUMBER			Α×				90	S					>		
CONDITIONS/PROCEDURES H	OF HOSPITALS	2.5%	25% 50	1 1	75%	97.5%	2.5%	25%	50%	75%	97.5%	2.5%	25%	20%	75%	97.5%
OVERALL (< 750 CASES)	2645	0.45	88	1.04	1.23	1.72	0.56	06.0	1.03	1.17	1.54	0.61	0.90	1.02	1.15	1.46
	7076		5	0	00	N	1		,	5		c c	0	5	C	70.
OVERALL(>= /30 CASES)	4007								-		•				-	
CONDITIONS																
AMI	1405	0.54	0.80	0.95	1.11	1.42	0.62	0.86	0.99	1.14	1.44	0.63	0.86	0.99	1.13	1.39
CHF	2335	0.43	0.79	0.98	1.17	1.64	09.0	0.85	0.99	1.13	1.49	0.66	0.89	1.00	1.13	1.41
PNEUMONIA/INFLUENZA	2428	0.41	0.78	26.0	1.18	1.68	0.53	0.84	1.00	1.17	1.55	0.57	0.86	1.01	1.16	1.50
COPD	435	0.00	0.63	26.0	1.34	2.06	0.30	0.78	1.02	1.26	1.74	0.40	0.82	1.01	1.24	1.69
TRANS. CEREBRAL ISCHEMIA	404 A	00.00	00.0	0.83	1.34	3.20	00.00	0.48	0.85	1.31	2.27	0.21	09.0	06.0	1.21	2.05
STROKE	1789	0.53	0.79	0.95	1.13	1.56	0.61	0.84	0.98	1.13	1.47	0.65	0.87	0.99	1.12	1.42
HIP FRACTURE	1199	0.21	0.67	0.93	1.27	2.10	0.40	0.76	0.94	1.19	1.80	0.47	0.78	0.97	1.16	1.64
SEPSIS	254	0.51	0.79	96.0	1.12	1.50	0.65	0.86	0.99	1.13	1.47	0.69	0.89	1.01	1.15	1.44
PROCEDURES ANGIOPLASIY	425	00.00	0.49	0.89	1.33	2.66	0.00	0.60	0.93	1.36	2.34	00.00	0.63	0.97	1.34	2.14
CABG	556	0.20		1.03	1.39	2.45	0.28	0.73	1.00	1.32	٥.	0.28	0.73	1.01	1.30	2.10
PACEMAKER	112	0.00	0.41	0.72	1.37	3.25	0.20	0.61	06.0	1.21	2.17	0.21	0.65	0.84	1.16	1.87
CAROTID ENDARTERECTOMY	7.3	00.00	00.00	0.85	1.33	2.90	0.00	0.14	0.74	1.28	2.43	00.00	0.42	0.86	1.38	2.86
HIP REPLACEMENT	763	00.00	0.53	0.94	1.44	2.77	0.19	79.0	96.0	1.31	2.12	0.26	0.71	0.94	1.26	1.91
REDUCT. OF HIP FRACTURE	276	00.00	0.56	0.86	1.22	2.05	0.31	0.68	0.92	1.19	1.76	0.38	0.77	96.0	1.12	1.58
PROSTATECTOMY	1576	00.00	0.00	0.73	1.57	3.56	0.00	0.49	0.91	1.40	2.63	0.00	0.57	0.92	1.29	2.21
CHOLECYSTECTOMY	714	00.00	0.49	0.95	1.54	2.68	00.00	0.62	0.93	1.37	2.22	0.22	0.67	0.98	1.27	1.93
HYSTERECTOMY	113	00.00	0.00	00.0	2.00	69.9	0.00	00.0	92.0	1.70	3.59	00.00	0.24	0.75	1.27	2.91

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1989

	NUMBER		30	DAYS				0	DAYS				180	O DAYS		
CONDITIONS/PROCEDURES H	OF HOSPITALS	2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%	2 . 5	25%	20%	75%	97.5%
OVERALL(< 750 CASES)	2746	0.50	0.87	1.04	1.23	1.73	0.58	0.89	1.03	1.17	1.54	0.61	0.89	1.01	1.14	1.44
OVERALL(>= 750 CASES)	5669	0.71	06.0	1.00	1.09	1.35	0.79	96.0	1.01	1.08	1.28	0.82	0.95	1.01	1.07	1.24
CONDITIONS																
AMI	1412	0.53	0.81	96.0	1.12	1.47	0.59	0.86	1.01	1.15	1.47	0.63	0.87	1.00	1.14	1.43
CHF	2293	0.47	08.0	0.97	1.18	1.69	0.58	0.86	1.00	1.14	1.48	99.0	0.89	1.02	1.14	1.40
PNEUMONIA/INFLUENZA	2179	0.45	0.77	0.97	1.19	1.67	0.54	0.85	1.01	1.18	1.55	09.0	0.86	1.02	1.18	1.51
COPD	324	0.21	0.68	0.99	1.32	2.13	77.0	0.78	1.04	1.27	1.91	0.49	0.84	1.04	1.24	1.66
TRANS. CEREBRAL ISCHEMIA	1 420	00.00	00.0	0.79	1.41	3.26	00.00	0.46	0.88	1.33	2.36	0.18	09.0	0.92	1.25	1.97
STROKE	1728	0.53	08.0	0.95	1.12	1.56	0.62	0.85	0.97	1.11	1.46	0.67	0.88	0.99	1.13	1.40
HIP FRACTURE	1126	0.24	0.67	0.95	1.30	2.04	0.39	0.75	0.98	1.21	1.71	97.0	0.78	0.97	1.18	1.59
SEPSIS	174	0.52	0.79	0.94	1.10	1.52	0.63	0.88	1.02	1.15	1.46	0.68	0.93	1.05	1.16	1.43
PROCEDURES																
ANGIOPLASTY	370	0.00	97.0	0.84	1.35	2.55	00.00	0.55	0.88	1.33	2.52	0.00	0.61	96.0	1.32	2.44
CABG	501	0.21	0.65	1.00	1.47	2.57	0.23	0.69	1.00	1.33	2.29	0.32	0.74	1.01	1.33	2.21
PACEMAKER	91	00.00	0.52	0.74	1.12	2.31	00.00	0.56	0.83	1.15	2.14	0.20	0.68	0.81	1.16	1.87
CAROTID ENDARTERECTOMY	55	00.00	00.0	0.82	1.51	5.01	0.00	27.0	0.86	1.31	4.00	00.00	0.43	0.85	1.28	3.12
HIP REPLACEMENT	989	00.00	0.52	0.92	1.44	2.46	00.00	0.65	96.0	1.27	1.95	0.21	0.67	96.0	1.19	1.75
REDUCT. OF HIP FRACTURE	546	0.19	0.57	0.91	1.23	1.96	0.31	0.71	96.0	1.19	1.74	0.41	0.78	96.0	1.13	1.53
PROSTATECTOMY	1570	00.00	00.0	0.67	1.50	3.46	00.00	27.0	0.86	1.36	2.67	00.00	0.58	0.93	1.28	2.15
CHOLECYSTECTOMY	089	00.00	0.53	0.94	1.53	2.90	00.00	0.62	0.97	1.36	2.15	0.22	0.66	0.95	1.26	1.98
HYSTERECTOMY	101	00.00	00.00	00.00	1.80	5.44	00.00	00.00	0.78	1.60	4.21	0.00	00.00	0.91	1.38	2.99

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1988

	NUMBER		3(ΑY				90	DAYS					O DAYS		
CONDITIONS/PROCEDURES HG	HOSPITALS	2.5%	25% 50	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%
OVERALL(< 750 CASES)	2838	0.46	0.89	1.05	1.23	1.75	0.54	06.0	1.03	1.16	1.57	0.59	06.0	1.02	1.14	1.45
OVERALL(>= 750 CASES)	2693	0.73	06.0	1.00	1.10	1.35	0.79	96.0	1.01	1.09	1.27	0.82	0.95	1.01	1.08	1.24
CONDITIONS																
AMI	1414	0.56	0.82	96.0	1.12	1.41	0.63	0.87	1.01	1.14	1.42	0.65	0.89	1.00	1.13	1.39
CHF	2246	0.45	0.79	0.97	1.18	1.61	09.0	0.86	1.00	1.14	1.43	0.68	06.0	1.02	1.13	1.37
PNEUMONIA/INFLUENZA	2069	0.44	0.79	0.97	1.17	1.68	0.57	0.85	1.01	1.17	1.59	0.61	0.87	1.01	1.16	1.53
COPD	310	0.21	0.67	0.92	1.30	2.17	0.39	0.79	0.98	1.20	1.81	0.51	0.82	0.99	1.19	1.59
TRANS. CEREBRAL ISCHEMIA	495	0.00	00.0	0.84	1.48	2.94	00.00	0.48	0.92	1.39	2.28	0.21	09.0	0.92	1.27	1.92
STROKE	1726	0.51	0.79	0.95	1.12	1.56	0.60	0.84	0.98	1.13	1.44	0.64	0.88	1.00	1.13	1.42
HIP FRACTURE	1119	0.24	0.65	96.0	1.27	2.07	0.40	0.78	0.98	1.21	1.77	0.47	0.80	0.98	1.17	1.64
SEPSIS	133	0.58	0.77	0.92	1.08	1.64	0.56	0.86	1.00	1.13	1.54	0.67	0.88	1.02	1.14	1.53
PROCEDURES ANGIOPLASTY	297	0.00	0.50	0.87	1.35	2.60	0.00	0.59	0.91	1.34	2.50	0.00	0.65	0.95	1.31	2.25
CABG	8 2 4	0.21	0.68	0.98	1.39	2.40	0.32	0.73	1.00	1.36	2.12	0.38	0.75	1.01	1.31	2.04
PACEMAKER	83	00.00	0.34	0.65	1.04	1.75	0.01	0.54	0.85	1.03	1.70	0.23	0.69	0.87	1.10	1.57
CAROTID ENDARTERECTOMY	69	0.00	00.00	09.0	1.23	3.30	0.00	0.33	0.62	1.09	2.50	00.00	0.44	0.68	1.16	1.87
HIP REPLACEMENT	029	0.00	0.49	0.95	1.40	2.65	0.00	99.0	1.01	1.31	2.15	0.24	0.70	96.0	1.24	1.87
REDUCT. OF HIP FRACTURE	259	0.00	0.61	0.91	1.26	2.16	0.38	9.74	96.0	1.21	1.94	0.44	0.77	96.0	1.16	1.79
PROSTATECTOMY	1619	0.00	00.00	0.78	1.53	3.69	0.00	0.54	0.92	1.39	2.57	00.00	0.61	0.93	1.30	2.21
CHOLECYSTECTOMY	642	0.00	0.50	0.96	1.44	3.04	00.00	0.61	96.0	1.36	2.26	0.25	99.0	96.0	1.27	2.01
HYSTERECTOMY	06	00.00	00.00	00.00	1.57	5.00	00.00	00.0	0.68	1.43	2.83	00.00	0.28	0.67	1.15	2.88

TABLE 5: MULTIPLICATIVE FACTORS FOR THE CALCULATION OF THE BOUNDS FOR PREDICTION INTERVALS

(n is the number of cases at your hospital and p is the predicted mortality rate)

	2	JA JA I TOMOTONI	COLON MILE	MILLELL VALL			o to a regional anter the	1011	I v call						
1		Factor for Upper Bound	Upper Ba	puno		<u> </u>	Factor for Upper Bound	Upper Bo	punc		4	Factor for Upper Bound	Upper Bo	punc	
۱۵۰	1%	2%	10%	20%	40%	1%	2%	10%	20%	40%	1%	2%	10%	20%	40%
25	2.95	2.73	2.68	2.63	2.59	2.15	2.04	2.01	1.99	1.97	1.17	1.16	1.16	1.15	1.15
50	2.76	2.65	2.63	2.60	2.58	2.05	2.00	1.99	1.97	1.96	1.16	1.15	1.15	1.15	1.15
75	2.70	2.63	2.61	2.59	2.58	2.02	1.99	1.98	1.97	1.96	1.16	1.15	1.15	1.15	1.15
100	2.67	2.61	2.60	2.59	2.58	2.01	1.98	1.97	1.97	1.96	1.16	1.15	1.15	1.15	1.15
150	2.64	2.60	2.59	2.59	2.58	1.99	1.97	1.97	1.96	1.96	1.15	1.15	1.15	1.15	1.15
200	2.62	2.60	2.59	2.58	2.58	1.98	1.97	1.97	1.96	1.96	1.15	1.15	1.15	1.15	1.15
300	2.61	2.59	2.58	2.58	2.58	1.98	1.97	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
400	2.60	2.59	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
200	2.59	2.58	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
750	2.59	2.58	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
1000	2.59	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
2000	2.58	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
5000	2.58	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
	Ŧ	Factor for Lower Bound	Lower Bo	puno		Ē	Factor for Lower Bound	Lower Bo	punc		í.	Factor for Lower Bound	Lower Bo	punc	
۵	1%	2%	10%	20%	40%	1%	2%	10%	20%	40%	1%	5%	10%	20%	40%
n Je		,	07 0	7	720	1,77	1 00	101	1 03	1 05	1 13	1 14	1 14	1 15	1 15
3	17-7-	747-	-2.40	-2.32	05.7	-1.17	-1.00	-1.91	-1.93	-1.93	-1.15	-1.14	+1.1+		CI:I-
20	-2.39	-2.50	-2.53	-2.55	-2.57	-1.87	-1.92	-1.93	-1.95	-1.96	-1.14	-1.15	-1.15	-1.I5	-I.I5
75	-2.45	-2.52	-2.54	-2.56	-2.57	-1.90	-1.93	-1.94	-1.95	-1.96	-1.14	-1.15	-1.15	-1.15	-1.15
100	-2.48	-2.54	-2.55	-2.56	-2.57	-1.91	-1.94	-1.95	-1.95	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
150	-2.51	-2.55	-2.56	-2.57	-2.57	-1.93	-1.95	-1.95	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
500	-2.53	-2.56	-2.56	-2.57	-2.57	-1.94	-1.95	-1.95	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
300	-2.54	-2.56	-2.57	-2.57	-2.57	-1.94	-1.95	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
400	-2.55	-2.57	-2.57	-2.57	-2.57	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
200	-2.56	-2.57	-2.57	-2.57	-2.58	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
750	-2.56	-2.57	-2.57	-2.57	-2.58	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
1000	-2.57	-2.57	-2.57	-2.57	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
2000	-2.57	-2.57	-2.57	-2.58	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
2000	-2.57	-2.58	-2.58	-2.58	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15

Medicare Hospital Information

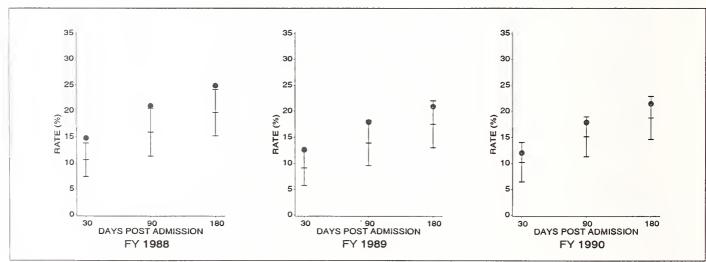
ALLEN COUNTY HOSPITAL 101 S 1ST ST IOLA, KS 66749 Medicare Provider Number: 170116

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				М	ORTALIT	Y RATE	S (%)			
		- 3	30 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	608	12.0	10.2	1.9	17.8	15.1	1.9	21.4	18.7	2.1
CONDITIONS:										
Acute Myocardial Infarction	22	40.9	33.5		50.0	37.3		59.1	40.9	
Congestive Heart Failure	37	40.5	15.9		51.4	25.4		54.1	32.3	
Pneumonia/Influenza	37	16.2	13.9		18.9	19.4		21.6	23.1	
Chronic Obstructive Pulmonary Disease	14	0.0	9.6		0.0	16.6		0.0	21.7	
Transient Cerebral Ischemia	6	0.0	1.7		0.0	4.2		0.0	7.2	
Stroke	29	17.2	21.3		27.6	27.0		31.0	31.1	
Hip Fracture	14	7.1	9.2		28.6	16.0		28.6	20.9	
Sepsis	12	0.0	26.3		0.0	33.7		16.7	38.1	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	16	0.0	2.9		6.3	5.2		6.3	6.9	
Open Reduction of Hip Fracture	3	0.0	6.7		0.0	11.3		0.0	14.6	
Prostatectomy	37	5.4	1.0	••••	8.1	2.5		8.1	4.3	
Cholecystectomy	10	0.0	1.8		0.0	4.0		0.0	6.0	
Hysterectomy	5	0.0	0.1		0.0	0.3		0.0	0.4	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (* 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ALLEN COUNTY HOSPITAL Medicare Provider Number: 170116

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:
Average age at admission 78.1 years	Cancer 4.9 %
Proportion female 55.6 %	Chronic cardiovascular disease 36.2 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.7 %
Referred by personal or HMO physician 48.7 %	Chronic renal disease
Transferred from skilled nursing facility 1.3 %	Chronic pulmonary disease 12.8 %
Admitted for elective procedure 18.8 %	Cerebrovascular degeneration 5.3 %
Admitted for emergency 1.6 %	Diabetes mellitus 5.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

DRIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	62.7%	Hospital	5.4 Days
State	36.0%	State	7.3 Days
Outside State	1.3%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE:	SPECIALTY SERVICES:
Total Beds 50	Burn Unit No
Occupancy Rate 46.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges(Not Available)	Hospice Care No
Case Mix Index (CMI) 1.1432	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/DrugNo
Registered Nurses	Rehabilitation No
Licensed Practical Nurses	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

ANDERSON COUNTY HOSPITAL

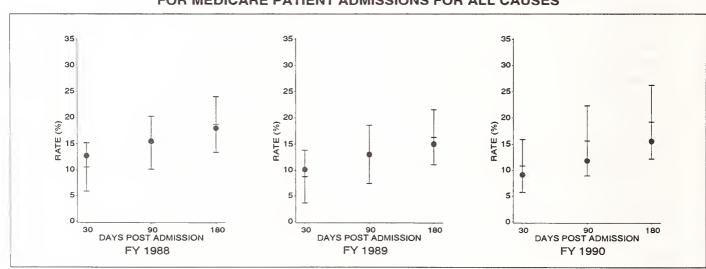
421 S MAPLE GARNETT, KS 66032 Medicare Provider Number: 170035

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				МС	ORTALIT	Y RATE	S (%)			
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	187	9.1	10.8	2.5	11.8	15.6	3.4	15.5	19.2	3.5
CONDITIONS:										
Acute Myocardial Infarction	14	21.4	29.6		21.4	32.9		21.4	36.0	
Congestive Heart Failure	14	0.0	11.9		7.1	18.2		14.3	23.6	
Pneumonia/Influenza	22	22.7	14.6		27.3	20.7		27.3	24.9	
Chronic Obstructive Pulmonary Disease	4	0.0	11.4		0.0	20.4		0.0	26.9	
Transient Cerebral Ischemia	1	0.0	0.9		0.0	2.4		0.0	4.5	
Stroke	12	0.0	17.7		0.0	23.4		0.0	27.4	
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	5	0.0	0.7		0.0	1.6		0.0	2.7	
Cholecystectomy	1	0.0	9.9		0.0	21.2		0.0	29.4	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ANDERSON COUNTY HOSPITAL Medicare Provider Number: 170035

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 79.4 years	Cancer 7.0 %
Proportion female	Chronic cardiovascular disease 38.0 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.0 %
Referred by personal or HMO physician 51.9 %	Chronic renal disease 2.7 %
Transferred from skilled nursing facility 0.0 %	Chronic pulmonary disease 18.7 %
Admitted for elective procedure 20.3 %	Cerebrovascular degeneration 3.2 %
Admitted for emergency 8.0 %	Diabetes mellitus 5.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	75.4%	Hospital	4.1 Days
State	22.8%	State	7.3 Days
Outside State	1.8%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990)
PROFILE:	SPECIALTY SERVICES:
Total Beds 58	Burn Unit No
Occupancy Rate 67.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 42.0 %	Hospice Care No
Case Mix Index (CMI) 0.9183	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/DrugNo
	Rehabilitation No
Licensed Practical Nurses 1	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

ARKANSAS CITY MEMORIAL HOSPITAL

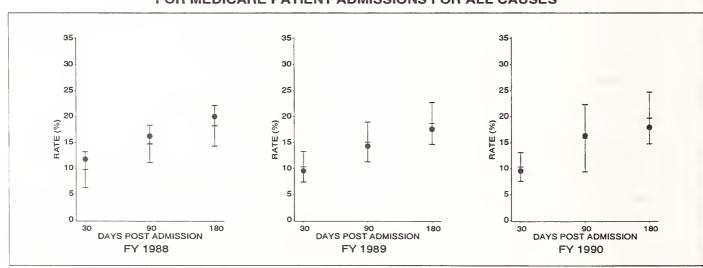
216 W BIRCH ST ARKANSAS CITY, KS 67005 Medicare Provider Number: 170150

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	ORTALIT	YRATE	S (%)			
		3	0 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	526	9.5	10.3	1.4	16.3	15.8	3.3	17.9	19.7	2.5
CONDITIONS:										
Acute Myocardial Infarction	11	27.3	23.2		27.3	26.2		27.3	29.2	
Congestive Heart Failure	22	13.6	15.6		27.3	24.2		27.3	30.8	
Pneumonia/Influenza	40	17.5	16.6		30.0	22.6		30.0	26.4	
Chronic Obstructive Pulmonary Disease	12	8.3	11.7		25.0	21.5		25.0	27.5	
Transient Cerebral Ischemia	2	0.0	0.9		0.0	2.3		0.0	4.3	
Stroke	25	40.0	18.3		40.0	24.5		40.0	28.1	
Hip Fracture	22	4.5	7.0		9.1	12.6		18.2	16.7	
Sepsis	10	0.0	25.9		10.0	34.7		10.0	40.5	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	6	0.0	4.7		16.7	8.1		16.7	10.8	
Open Reduction of Hip Fracture	4	25.0	3.9		25.0	7.3		25.0	10.2	
Prostatectomy	30	0.0	0.9		3.3	2.1		3.3	3.8	
Cholecystectomy	13	0.0	3.3		0.0	6.0		0.0	8.3	
Hysterectomy	3	0.0	0.1		0.0	0.3	****	0.0	0.6	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ARKANSAS CITY MEMORIAL HOSPITAL Medicare Provider Number: 170150

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	77. 7.	0	0.7.04
Average age at admission	//./ years	Cancer	8.7 %
Proportion female	59.3 %	Chronic cardiovascular disease	32.1 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.1 %
Referred by personal or HMO physician	36.5 %	Chronic renal disease	1.1 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	19.4 %
Admitted for elective procedure	9.5 %	Cerebrovascular degeneration	5.5 %
Admitted for emergency	16.2 %	Diabetes mellitus	8.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

County/City	87.6%	Hospital	5.6 Days
State	7.1%	State	7.3 Days
Dutside State	5.3%	National	8.6 Days

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE: Total Beds	SPECIALTY SERVICES: Burn Unit
Total Number of Physicians	Other Intensive Care No Trauma Center No OTHER SPECIALTY/HOSPITAL-BASED SERVICES: Alcohol/Drug No Rehabilitation No Psychiatric No Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

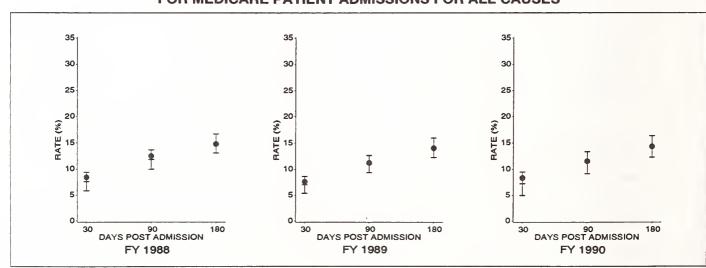
ASBURY-SALINA REGIONAL MEDICAL CENTER 400 S SANTA FE SALINA, KS 67401 Medicare Provider Number: 170012

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	ORTALIT	Y RATE	S (%)			
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1674	8.3	7.2	1.1	11.5	11.2	1.1	14.3	14.3	1.0
CONDITIONS:										
Acute Myocardial Infarction	44	40.9	27.9		45.5	31.3		52.3	34.3	
Congestive Heart Failure	54	20.4	15.7	6.8	29.6	24.5	7.8	35.2	30.7	8.0
Pneumonia/influenza	63	17.5	15.0	5.0	19.0	20.8	5.4	22.2	24.8	6.0
Chronic Obstructive Pulmonary Disease	23	26.1	8.3		30.4	14.8		34.8	19.9	
Transient Cerebral Ischemia	13	0.0	1.3		0.0	2.9		0.0	4.7	
Stroke	45	31.1	23.1		35.6	29.4		37.8	33.2	
Hip Fracture	87	5.7	6.9	3.0	10.3	12.0	5.9	11.5	15.7	6.3
Sepsis	11	27.3	30.8		36.4	39.1		36.4	43.7	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	22	0.0	4.0		4.5	8.3		13.6	12.1	
Carotid Endarterectomy	16	0.0	1.2		0.0	2.4		6.3	3.5	
Hip Replacement/Reconstruction	76	1.3	3.6	2.7	5.3	6.7	3.5	6.6	8.9	3.7
Open Reduction of Hip Fracture	28	0.0	5.2		0.0	9.4		0.0	13.0	
Prostatectomy	85	0.0	0.8	1.5	1.2	1.9	2.2	2.4	3.4	3.4
Cholecystectomy	49	0.0	2.6		0.0	5.3		2.0	7.6	
Hysterectomy	20	0.0	0.2		0.0	0.4		0.0	8.0	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases Is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ASBURY-SALINA REGIONAL MEDICAL CENTER Medicare Provider Number: 170012

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	74 5 years	Cancer	5.9 %
	•	Odrice:	3.3 70
Proportion female	54.1 %	Chronic cardiovascular disease	34.6 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.4 %
Referred by personal or HMO physiclan	50.2 %	Chronic renal disease	6.0 %
Transferred from skilled nursing facility	2.3 %	Chronic pulmonary disease	13.6 %
Admitted for elective procedure	44.3 %	Cerebrovascular degeneration	4.5 %
Admitted for emergency	0.6 %	Diabetes mellitus	6.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City 50.6%	Hospital	8.6 Days
State	State	7.3 Days
Outside State	National	8.6 Days
Total		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE:	SPECIALTY SERVICES:
Total Beds 187	Burn Unit No
Occupancy Rate 65.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric Yes
Medicare Discharges 37.1 %	Hospice Care Yes
Case Mix Index (CMI) 1.4115	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 90	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/Drug No
Registered Nurses	RehabilitationYes
Licensed Practical Nurses 24	Psychiatric Yes
** Except for CMI	Medicare Swing Beds No

^{*} Not used in calculating mortality rates

ASHLAND DISTRICT HOSPITAL

709 OAK ST ASHLAND, KS 67831 Medicare Provider Number: 170050

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				M	ORTALIT	Y RATE	S (%)	-		
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	53	9.4	10.1	4.9	15.1	15.2	5.0	18.9	19.2	5.8
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	2	0.0	8.1		0.0	12.8		0.0	17.4	
Pneumonia/Influenza	9	11.1	13.4		22.2	18.9		22.2	22.6	
Chronic Obstructive Pulmonary Disease	2	0.0	13.9		0.0	22.4		0.0	28.3	
Transient Cerebral Ischemia	2	0.0	1.5		0.0	3.6		0.0	6.4	
Stroke	1	100.0	51.8		100.0	59.7		100.0	61.9	
Hip Fracture	0									
Sepsis	1	0.0	12.1		0.0	16.3		0.0	20.1	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	1	0.0	0.2		0.0	0.6	••••	0.0	1.0	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

ASHLAND DISTRICT HOSPITAL

Medicare Provider Number: 170050

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:
Average age at admission 78.6 years	Cancer 3.8 %
Proportion female 73.6 %	Chronic cardiovascular disease 60.4 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 1.9 %
Referred by personal or HMO physician 69.8 %	Chronic renal disease 0.0 %
Transferred from skilled nursing facility 0.0 %	Chronic pulmonary disease 37.7 %
Admitted for elective procedure 0.0 %	Cerebrovascular degeneration 5.7 %
Admitted for emergency 11.3 %	Diabetes mellitus

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	86.1%	Hospital	4.1 Days
State	12.9%	State	7.3 Days
Outside State	1.0%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	989
PROFILE:	SPECIALTY SERVICES:
Total Beds 16	Burn Unit No
Occupancy Rate 6.3 %	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Geriatric No
Medicare Discharges 66.3 %	Hospice Care No
Case Mix Index (CMI) 0.9605	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0 Registered Nurses 6	Alcohol/DrugNo
	Rehabilitation No
Licensed Practical Nurses 0	Psychiatric No
** Except for CMI	Medicare Swing BedsYes

^{*} Not used in calculating mortality rates

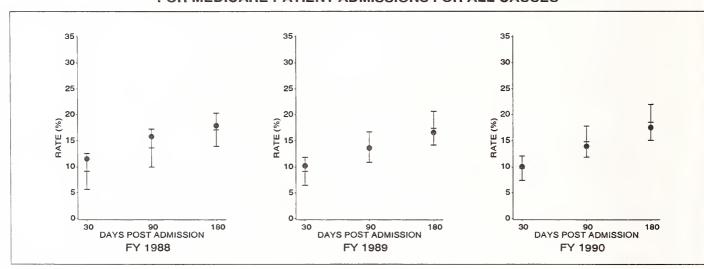
ATCHISON HOSPITAL 1300 N 2ND ST ATCHISON, KS 66002 Medicare Provider Number: 170022

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				M	ORTALIT	Y RATE	S (%)			
		3	BO DAY	s _	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	641	10.0	9.7	1.2	13.9	14.8	1.5	17.5	18.5	1.7
CONDITIONS:										
Acute Myocardial Infarction	22	36.4	26.4		45.5	30.0		54.5	32.8	
Congestive Heart Failure	51	11.8	17.2	8.2	17.6	27.2	11.1	29.4	33.7	12.0
Pneumonia/Influenza	47	12.8	15.3		14.9	20.5		17.0	24.1	
Chronic Obstructive Pulmonary Disease	8	0.0	10.2		0.0	16.9		0.0	22.5	
Transient Cerebral Ischemia	16	0.0	1.2		0.0	3.0		0.0	5.1	
Stroke	20	20.0	18.1		35.0	26.1		40.0	31.0	
Hip Fracture	24	8.3	6.8		12.5	12.6		16.7	17.0	
Sepsis	8	62.5	31.9		62.5	40.2		62.5	45.2	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	2	0.0	0.5		0.0	1.2		0.0	2.2	
Carotid Endarterectomy	1	0.0	1.3		0.0	2.6		0.0	3.9	
Hip Replacement/Reconstruction	16	0.0	1.9		0.0	3.7		0.0	5.2	
Open Reduction of Hip Fracture	14	14.3	5.8		14.3	10.6		14.3	14.4	
Prostatectomy	14	0.0	1.2		0.0	3.0		0.0	5.2	
Cholecystectomy	14	7.1	1.3		7.1	2.5		14.3	3.6	
Hysterectomy	5	0.0	0.2		0.0	0.5		20.0	0.8	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ATCHISON HOSPITAL Medicare Provider Number: 170022

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission 77.	.6 years	Cancer	6.4 %
Proportion female	.0 %	Chronic cardiovascular disease	34.8 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.3 %
Referred by personal or HMO physician 47.	.0 %	Chronic renal disease	2.0 %
Transferred from skilled nursing facility 3.	.0 %	Chronic pulmonary disease	11.7 %
Admitted for elective procedure 20.	.0 %	Cerebrovascular degeneration	2.2 %
Admitted for emergency	.2 %	Diabetes mellitus	6.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

N:	MEDICARE AVERAGE LENGTH OF STAY:	
75.3%	Hospital	5.1 Days
14.6%	State	7.3 Days
10.1%	National	8.6 Days
100.0%		
	75.3% 14.6% 10.1%	75.3% Hospital

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds 131	Burn Unit No
Occupancy Rate	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 40.9 %	Hospice Care No
Case Mix Index (CMI) 1.2234	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 18	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	RehabilitationYes
Licensed Fractical Naises	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

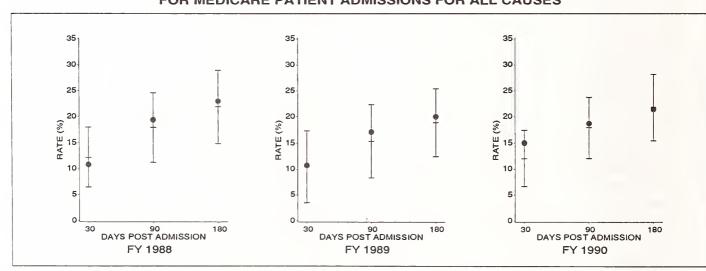
AUGUSTA MEDICAL COMPLEX INC 2101 DEARBORN AUGUSTA, KS 67010 Medicare Provider Number: 170171

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				IV	IORTALIT	YRATE	S (%)			
		3	O DAY	S	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	187	15.0	12.0	2.7	18.7	17.9	2.9	21.4	21.8	3.2
CONDITIONS:										
Acute Myocardial Infarction	1	0.0	37.4		0.0	40.5		0.0	44.5	
Congestive Heart Failure	9	0.0	14.8		11.1	22.8		11.1	28.9	
Pneumonia/Influenza	12	8.3	20.6		8.3	28.4		25.0	32.5	
Chronic Obstructive Pulmonary Disease	6	16.7	5.6		16.7	9.7		16.7	12.7	
Transient Cerebral Ischemia	8	0.0	1.2		0.0	2.7		0.0	4.5	
Stroke	16	43.8	27.7		43.8	39.1		43.8	45.1	
Hip Fracture	12	8.3	8.6		8.3	13.9		25.0	17.8	
Sepsis	3	33.3	36.9		33.3	42.9		33.3	47.1	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	6	0.0	6.9		0.0	11.1		16.7	14.5	
Open Reduction of Hip Fracture	5	20.0	5.7		20.0	10.0		20.0	13.6	
Prostatectomy	1	0.0	0.8		0.0	1.3		0.0	1.8	
Cholecystectomy	2	0.0	2.8		0.0	4.1		0.0	4.8	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



AUGUSTA MEDICAL COMPLEX INC

Medicare Provider Number: 170171

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	79.5 years	Cancer	5.3 %
Proportion female	69.0 %	Chronic cardiovascular disease	42.8 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.5 %
Referred by personal or HMO physician	31.0 %	Chronic renal disease	4.8 %
Transferred from skilled nursing facility	0.5 %	Chronic pulmonary disease	15.0 %
Admitted for elective procedure	2.7 %	Cerebrovascular degeneration	4.8 %
Admitted for emergency	0.0 %	Diabetes mellitus	4.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	77.2%	Hospital	8.0 Days
State	21.3%	State	7.3 Days
Outside State	1.5%	National	8.6 Days
Total	100.0%		

ROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Ownership.Control Private, Non-Profit	Coronary Care Unit No
Case Mix Index (CMI) 1.2057	Hospice Care N
TAFFING:	Intensive Care Unit N
Medical Residents/Interns 0	Organ Transplant N
Registered Nurses 10	Trauma Center N
Licensed Practical Nurses5	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/DrugYe
	RehabilitationN
	Psychiatric N
	Medicare Swing BedsYe

^{*} Not used in calculating mortality rates

BAXTER MEMORIAL HOSPITAL

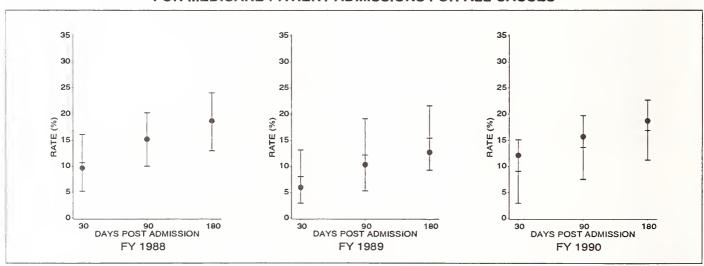
10TH & WASHINGTON AVE BAXTER SPRINGS, KS 66713 Medicare Provider Number: 170021

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	*.**.*			МС	DRTALIT	Y RATE	S (%)			
			30 DAY	S	9	0 DAYS	5	18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	198	12.1	9.0	3.1	15.7	13.6	3.1	18.7	16.9	2.9
CONDITIONS:										
Acute Myocardial Infarction	3	0.0	16.0		33.3	18.6		33.3	21.5	
Congestive Heart Failure	5	0.0	15.4		0.0	26.6		20.0	34.7	
Pneumonia/Influenza	19	26.3	19.0		26.3	25.4		31.6	29.4	
Chronic Obstructive Pulmonary Disease	4	0.0	7.4		0.0	14.0		25.0	19.8	
Transient Cerebral Ischemia	1	0.0	0.7		0.0	1.7		0.0	3.0	
Stroke	8	0.0	18.1		25.0	27.9		37.5	32.3	
Hip Fracture	2	0.0	6.9		0.0	12.9		0.0	16.6	
Sepsis	1	0.0	37.6		0.0	44.0		0.0	50.6	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	1	0.0	5.0		0.0	9.9		0.0	13.6	
Prostatectomy	10	20.0	0.9		20.0	1.9		20.0	3.0	
Cholecystectomy	0									
Hysterectomy	2	0.0	0.1		0.0	0.3		0.0	0.6	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BAXTER MEMORIAL HOSPITAL

Medicare Provider Number: 170021

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 74.6 yea	rs Cancer
Proportion female 62.1 %	Chronic cardiovascular disease 41.4 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.0 %
Referred by personal or HMO physician 90.9 %	Chronic renal disease 0.0 %
Transferred from skilled nursing facility 0.0 %	Chronic pulmonary disease 15.7 %
Admitted for elective procedure 0.0 %	Cerebrovascular degeneration 3.0 %
Admitted for emergency 39.9 %	Diabetes mellitus 6.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	76.9%	Hospital	6.6 Days
State	1.6%	State	7.3 Days
Outside State	21.5%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 32.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 37.2 %	Hospice Care No
Case Mix Index (CMI) 0.9317	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians6	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/DrugYes
	Rehabilitation No
Licensed Practical Nurses 9	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

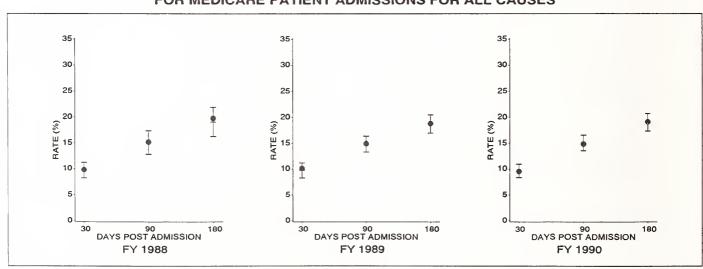
BETHANY MEDICAL CENTER
51 N 12TH ST
KANSAS CITY, KS 66102
Medicare Provider Number: 170148

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				МС	ORTALIT	YRATE	S (%)			
		3	0 DAY	S	9	0 DAYS	<u> </u>	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2238	9.5	9.6	0.6	14.8	15.0	0.8	19.1	19.0	0.8
CONDITIONS:										
Acute Myocardial Infarction	60	26.7	27.0	5.8	33.3	29.6	6.8	36.7	32.3	7.1
Congestive Heart Failure	143	15.4	14.0	3.1	20.3	22.2	4.1	24.5	28.3	5.0
Pneumonia/Influenza	88	17.0	19.8	5.8	27.3	26.8	4.9	33.0	31.2	5.3
Chronic Obstructive Pulmonary Disease	81	11.1	7.4	5.3	17.3	13.6	7.1	23.5	18.2	6.9
Transient Cerebral Ischemia	39	7.7	2.5		7.7	5.5		10.3	8.7	
Stroke	72	16.7	20.9	6.0	25.0	27.8	5.9	27.8	31.7	6.6
Hip Fracture	41	4.9	7.5		7.3	13.1		14.6	16.7	
Sepsis	34	29.4	23.6		35.3	32.9		47.1	38.1	
PROCEDURES:										
Angioplasty	31	6.5	4.8		6.5	6.3		6.5	7.5	
Coronary Artery Bypass Graft	24	20.8	6.8		20.8	9.4		20.8	10.5	
Initial Pacemaker Insertion	12	0.0	2.8		8.3	6.1		8.3	9.6	
Carotid Endarterectomy	16	6.3	1.7		6.3	3.1		6.3	4.5	
Hip Replacement/Reconstruction	29	0.0	2.3		3.4	4.2		10.3	5.7	
Open Reduction of Hip Fracture	16	6.3	8.0		6.3	14.8		6.3	19.5	
Prostatectomy	53	0.0	1.3	2.5	5.7	3.0	3.5	7.5	5.2	5.0
Cholecystectomy	31	0.0	4.0		9.7	6.9		16.1	8.6	
Hysterectomy	11	0.0	1.0		0.0	2.4		0.0	3.9	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BETHANY MEDICAL CENTER Medicare Provider Number: 170148

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	75.0 years	Cancer	9.4 %
Proportion female	58.8 %	Chronic cardiovascular disease	45.3 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.1 %
Referred by personal or HMO physician	42.6 %	Chronic renal disease	3.7 %
Transferred from skilled nursing facility	0.6 %	Chronic pulmonary disease	18.8 %
Admitted for elective procedure	14.0 %	Cerebrovascular degeneration	4.9 %
Admitted for emergency	56.2 %	Diabetes mellitus	9.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	87.3%	Hospital	9.1 Days
State	6.9%	State	7.3 Days
Outside State	5.8%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 64.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric Yes
Medicare Discharges 46.1 %	Hospice Care No
Case Mix Index (CMI) 1.2960	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 146	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/DrugYes
Licensed Practical Nurses	RehabilitationYes
	Psychiatric Yes
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

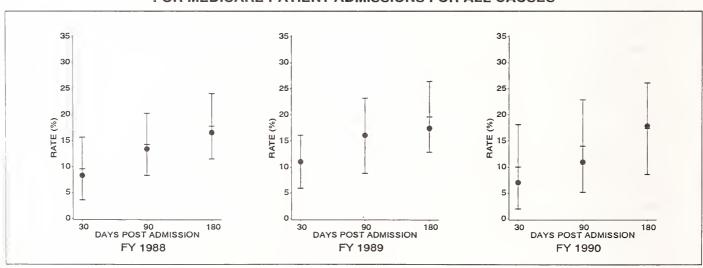
BOB WILSON MEM GRANT COUNTY HOSPITAL 415 N MAIN ST ULYSSES, KS 67880 Medicare Provider Number: 170110

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	ORTALIT	YRATE	S (%)			
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	129	7.0	10.0	4.1	10.9	14.0	4.4	17.8	17.3	4.4
CONDITIONS:										
Acute Myocardial Infarction	11	27.3	30.6		27.3	33.1		36.4	36.2	
Congestive Heart Failure	9	0.0	10.6		22.2	16.5		44.4	22.3	
Pneumonia/Influenza	19	5.3	8.3		5.3	11.6		5.3	14.2	
Chronic Obstructive Pulmonary Disease	8	0.0	9.0		0.0	16.6		12.5	21.8	
Transient Cerebral Ischemia	3	0.0	0.7		0.0	1.8		0.0	3.1	
Stroke	4	75.0	18.7		75.0	24.6		75.0	28.7	
Hip Fracture	0									
Sepsis	1	100.0	51.4		100.0	56.1		100.0	60.4	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BOB WILSON MEM GRANT COUNTY HOSPITAL Medicare Provider Number: 170110

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:
Average age at admission 75.4 years	Cancer 3.1 %
Proportion female 55.8 %	Chronic cardiovascular disease 48.8 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.0 %
Referred by personal or HMO physician 48.1 %	Chronic renal disease
Transferred from skilled nursing facility 0.0 %	Chronic pulmonary disease 25.6 %
Admitted for elective procedure 0.0 %	Cerebrovascular degeneration 1.6 %
Admitted for emergency 11.6 %	Diabetes mellitus 8.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	60.2%	Hospital	6.4 Days
State	37.1%	State	7.3 Days
Outside State	2.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	989
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 22.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric Yes
Medicare Discharges 38.9 %	Hospice Care No
Case Mix Index (CMI) 0.9783	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/DrugNo
Registered Nurses 16	Rehabilitation No
Licensed Practical Nurses	Psychiatric No
** Except for CMI	Medicare Swing BedsYes

^{*} Not used in calculating mortality rates

CEDAR VALE REGIONAL HOSPITAL

501 CEDAR ST BOX 398 CEDAR VALE, KS 67024 Medicare Provider Number: 170172

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
			30 DAY	s	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	49	20.4	12.4		24.5	18.7		32.7	23.2	
CONDITIONS:										
Acute Myocardial infarction	1	100.0	64.1		100.0	72.6		100.0	76.1	
Congestive Heart Failure	3	0.0	8.9	••••	0.0	15.1		0.0	20.5	
Pneumonia/influenza	12	16.7	13.1		25.0	18.2		41.7	21.8	
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebrai ischemia	1	0.0	0.7		0.0	1.7		0.0	2.8	•••••
Stroke	2	0.0	23.8		0.0	39.0	*****	0.0	48.9	
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hlp Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

CEDAR VALE REGIONAL HOSPITAL Medicare Provider Number: 170172

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 78.6	.6 years	Cancer	6.1 %
Proportion female 53.	.1 %	Chronic cardiovascular disease	53.1 %
DMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician 71.4	.4 %	Chronic renal disease	4.1 %
Transferred from skilled nursing facility 0.0	.0 %	Chronic pulmonary disease	14.3 %
Admitted for elective procedure 0.0	.0 %	Cerebrovascular degeneration	12.2 %
Admitted for emergency 0.0	.0 %	Diabetes mellitus	12.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	\:	MEDICARE AVERAGE LENGTH OF STAY:	:
County/City	68.3%	Hospital	5.3 Days
State	24.1%	State	7.3 Days
Outside State	7.6%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	90
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 71.0 %	Cardiac Intensive Care No
Ownership/Control Private, For Profit	Comprehensive Geriatric No
Medicare Discharges(Not Available)	Hospice Care No
Case Mix Index (CMI) 1.0505	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians (Not Available)	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
Medical Residents/Interns (Not Available)	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses(Not Available)	Alcohol/DrugYes
Licensed Practical Nurses (Not Available)	Rehabilitation No
(Not Available)	Psychiatric No
** Except for CMI	Medicare Swing Beds No

^{*} Not used in calculating mortality rates

CENTRAL KANSAS MEDICAL CENTER

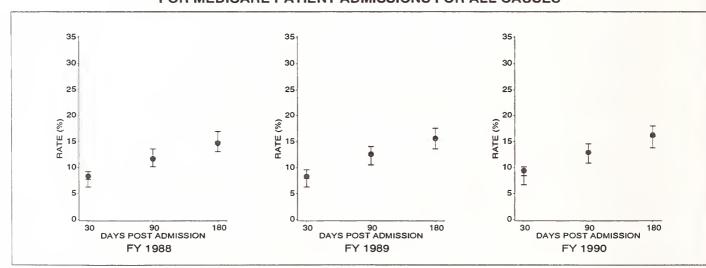
3515 BROADWAY GREAT BEND, KS 67530 Medicare Provider Number: 170033

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		3	0 DAY	S	9	0 DAYS	3	18	0 DAYS	>
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1280	9.4	8.4	0.9	12.9	12.7	0.9	16.2	15.9	1.0
CONDITIONS:										
Acute Myocardial Infarction	35	25.7	27.3		40.0	30.7		40.0	33.6	*
Congestive Heart Failure	63	22.2	13.7	6.3	33.3	21.6	7.9	39.7	27.4	9.2
Pneumonia/Influenza	124	11.3	14.7	6.1	13.7	20.2	7.8	17.7	23.9	7.3
Chronic Obstructive Pulmonary Disease	4	0.0	5.3		0.0	10.3		0.0	14.6	
Transient Cerebral Ischemia	16	12.5	1.6		12.5	3.7		12.5	6.2	
Stroke	45	13.3	17.4		15.6	22.4		15.6	25.7	
Hip Fracture	40	5.0	6.9		7.5	12.0	*****	10.0	15.4	
Sepsis	20	30.0	19.2		35.0	28.9		35.0	34.4	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	7	14.3	4.3		14.3	8.7		28.6	12.5	
Carotid Endarterectomy	3	0.0	1.0		33.3	2.1		33.3	3.3	
Hip Replacement/Reconstruction	44	0.0	2.7		0.0	5.0		0.0	6.7	
Open Reduction of Hip Fracture	17	11.8	5.2		17.6	9.3		17.6	12.3	
Prostatectomy	46	4.3	0.8		4.3	1.8		8.7	3.0	
Cholecystectomy	23	13.0	2.5		13.0	4.6		13.0	6.1	
Hysterectomy	9	0.0	0.2		0.0	0.5		0.0	0.9	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CENTRAL KANSAS MEDICAL CENTER Medicare Provider Number: 170033

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	76.7 years	Cancer	6.2 %
Proportion female	56.8 %	Chronic cardiovascular disease	39.9 %
DMISSION SOURCES/TYPES:		Chronic liver disease	0.7 %
Referred by personal or HMO physician	42.8 %	Chronic renal disease	0.9 %
Transferred from skilled nursing facility	0.3 %	Chronic pulmonary disease	18.7 %
Admitted for elective procedure	23.4 %	Cerebrovascular degeneration	4.1 %
Admitted for emergency	6.3 %	Diabetes mellitus	9.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	60.9%	Hospital	7.1 Days
State	37.4%	State	7.3 Days
Outside State	1.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	90
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 67.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 52.3 %	Hospice Care No
Case Mix Index (CMI) 1.2217	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 40	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns 0	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/DrugYes
Licensed Practical Nurses	Rehabilitation No
isomobili racioal raisos	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

CHEYENNE COUNTY HOSPITAL

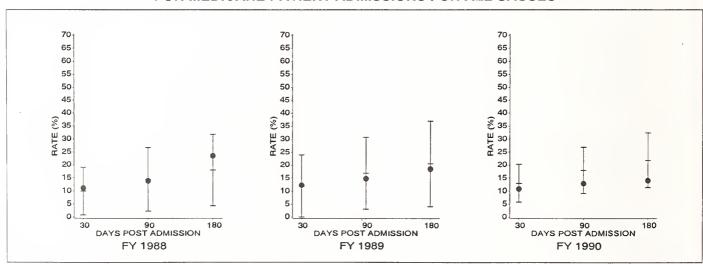
210 WEST FIRST SAINT FRANCIS, KS 67756 Medicare Provider Number: 170064

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
		3	30 DAY	S	9	0 DAYS	3	18	0 DAYS	>
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	93	10.8	13.0	3.6	12.9	18.0	4.4	14.0	21.8	5.3
CONDITIONS:										
Acute Myocardial Infarction	6	66.7	39.3		66.7	42.7		66.7	46.0	
Congestive Heart Failure	6	16.7	12.5		16.7	19.5		16.7	25.2	
Pneumonia/Influenza	5	20.0	14.2		20.0	19.8		20.0	23.0	
Chronic Obstructive Pulmonary Disease	1	0.0	3.1		0.0	6.2		0.0	9.5	
Transient Cerebral Ischemia	0									
Stroke	4	0.0	21.5		0.0	29.9		0.0	35.0	
Hip Fracture	4	0.0	12.4		0.0	22.1		25.0	27.8	
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	2	0.0	7.3		0.0	13.1		0.0	16.2	
Open Reduction of Hip Fracture	3	0.0	12.7		0.0	23.7		33.3	30.7	
Prostatectomy	6	0.0	0.9	•	0.0	2.3		0.0	4.1	
Cholecystectomy	1	0.0	1.7		0.0	2.7		0.0	3.9	
Hysterectomy	2	0.0	2.4		0.0	5.5		0.0	9.4	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CHEYENNE COUNTY HOSPITAL Medicare Provider Number: 170064

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	78.8 years	Cancer	3.2 %
Proportion female	52.7 %	Chronic cardiovascular disease	43.0 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	48.4 %	Chronic renal disease	4.3 %
Transferred from skilled nursing facility	1.1 %	Chronic pulmonary disease	9.7 %
Admitted for elective procedure	5.4 %	Cerebrovascular degeneration	5.4 %
Admitted for emergency	9.7 %	Diabetes mellitus	12.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	92.9%	Hospital	4.3 Days
State	5.7%	State	7.3 Days
Outside State	1.4%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 198	9
PROFILE:	SPECIALTY SERVICES:
Total Beds 23	Burn Unit No
Occupancy Rate 21.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 57.4 %	Hospice Care No
Case Mix Index (CMI) 1.1227	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Licensed Flactical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

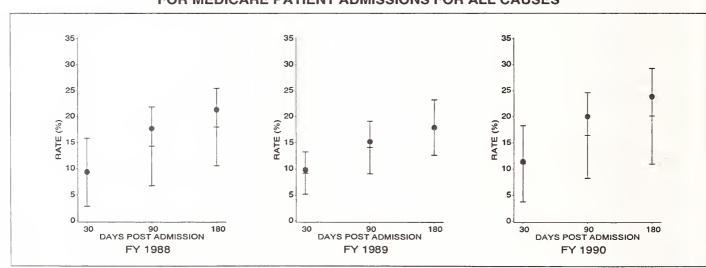
CITIZENS MEDICAL CENTER

100 E COLLEGE DRIVE COLBY, KS 67701 Medicare Provider Number: 170008

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	185	11.4	11.0	3.6	20.0	16.4	4.1	23.8	20.1	4.6
CONDITIONS:										
Acute Myocardial Infarction	3	33.3	42.3		33.3	45.6		33.3	49.3	
Congestive Heart Failure	14	21.4	13.5		35.7	21.4		50.0	27.6	
Pneumonia/Influenza	25	16.0	15.8		28.0	21.4		32.0	24.7	
Chronic Obstructive Pulmonary Disease	5	0.0	8.4		0.0	13.8		20.0	18.2	
Transient Cerebral Ischemia	4	0.0	1.0		0.0	2.3		0.0	4.0	
Stroke	7	42.9	20.3		57.1	29.3		71.4	34.2	
Hip Fracture	1	0.0	5.9		100.0	12.5		100.0	17.4	
Sepsis	1	0.0	19.4		100.0	22.5		100.0	26.4	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	6	0.0	0.4		0.0	0.8		0.0	1.5	
Cholecystectomy	2	0.0	0.4		0.0	0.6		0.0	0.9	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



CITIZENS MEDICAL CENTER Medicare Provider Number: 170008

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission 7	77.4 years	Cancer	7.0 %
Proportion female 5	53.0 %	Chronic cardiovascular disease	32.4 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.5 %
Referred by personal or HMO physician 5	51.4 %	Chronic renal disease	4.3 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	21.1 %
Admitted for elective procedure	8.1 %	Cerebrovascular degeneration	4.3 %
Admitted for emergency4	12.2 %	Diabetes mellitus	5.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	79.5%	Hospital	4.2 Days
State	17.2%	State	7.3 Days
Outside State	3.3%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	90
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 36.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 49.2 %	Hospice Care No
Case Mix Index (CMI) 1.0539	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 6	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns 0	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

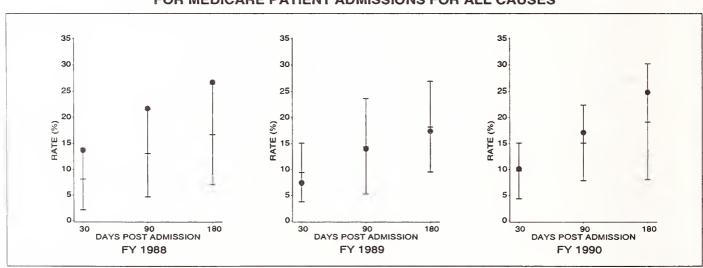
CLARA BARTON HOSPITAL

250 W NINTH ST HOISINGTON, KS 67544 Medicare Provider Number: 170112

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
			BO DAY	S	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	129	10.1	9.7	2.7	17.1	15.1	3.6	24.8	19.1	5.5
CONDITIONS:										
Acute Myocardial Infarction	3	0.0	33.6		0.0	36.0		0.0	38.5	
Congestive Heart Failure	4	0.0	7.9		0.0	13.1		25.0	17.9	
Pneumonia/Influenza	13	0.0	9.7		7.7	13.7	•••••	15.4	16.6	
Chronic Obstructive Pulmonary Disease	1	0.0	3.2		0.0	6.4		0.0	10.4	
Transient Cerebral Ischemia	1	0.0	0.7		0.0	1.8		0.0	3.2	
Stroke	7	14.3	15.5		14.3	20.6		14.3	24.2	
Hip Fracture	1	0.0	1.3		0.0	2.6		0.0	4.1	
Sepsis	4	25.0	30.9		25.0	41.3		50.0	47.9	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	1	0.0	0.5		0.0	0.9	••••	0.0	1.3	••••
Hysterectomy	1	0.0	0.3		0.0	0.7		0.0	1.2	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



CLARA BARTON HOSPITAL Medicare Provider Number: 170112

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

verage age at admission 78.5	3 years	Cancer	8.5 %
Proportion female	2 %	Chronic cardiovascular disease	34.1 %
OMISSION SOURCES/TYPES:		Chronic liver disease	0.8 %
Referred by personal or HMO physician 30.:	2 %	Chronic renal disease	2.3 %
Transferred from skilled nursing facility 1.0	6 %	Chronic pulmonary disease	16.3 %
Admitted for elective procedure 85.	3 %	Cerebrovascular degeneration	3.9 %
Admitted for emergency 8.5	5 %	Diabetes mellitus	14.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	89.1%	Hospital	4.9 Days
State	10.5%	State	7.3 Days
Outside State	0.4%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	90
PROFILE:	SPECIALTY SERVICES:
Total Beds41	Burn Unit No
Occupancy Rate 31.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 56.0 %	Hospice Care No
Case Mix Index (CMI) 1.1063	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/DrugYes
Licensed Practical Nurses	Rehabilitation No
Licerised Fractical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used In calculating mortality rates

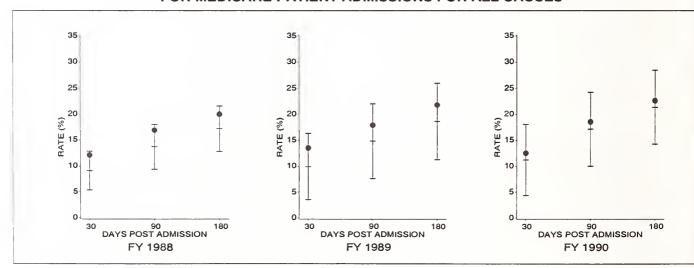
CLAY COUNTY HOSPITAL

617 LIBERTY ST CLAY CENTER, KS 67432 Medicare Provider Number: 170054

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	287	12.5	11.2	3.4	18.5	17.1	3.6	22.6	21.3	3.6
CONDITIONS:										
Acute Myocardial Infarction	11	27.3	31.3		36.4	37.1		45.5	40.8	
Congestive Heart Failure	20	10.0	14.7		20.0	22.9		25.0	29.1	
Pneumonia/Influenza	37	18.9	19.2		24.3	26.4		24.3	31.1	
Chronic Obstructive Pulmonary Disease	5	20.0	8.8		20.0	15.2		20.0	20.7	
Transient Cerebral Ischemia	2	0.0	1.2		0.0	3.2		0.0	6.0	
Stroke	10	20.0	21.4		20.0	29.5		20.0	34.3	
Hip Fracture	3	0.0	3.0		0.0	5.4		0.0	7.3	
Sepsis	3	33.3	26.9		33.3	34.8	••••	33.3	39.5	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	12	8.3	2.2		8.3	4.2		8.3	5.6	
Hysterectomy	6	0.0	1.2		0.0	2.9		0.0	4.5	••••

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



CLAY COUNTY HOSPITAL Medicare Provider Number: 170054

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 80.4 years	Cancer 8.3 %
Proportion female 59.7 %	Chronic cardiovascular disease 43.1 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.3 %
Referred by personal or HMO physician 42.4 %	Chronic renal disease 2.1 %
Transferred from skilled nursing facility 0.7 %	Chronic pulmonary disease 11.1 %
Admitted for elective procedure 96.5 %	Cerebrovascular degeneration 5.2 %
Admitted for emergency 1.4 %	Diabetes mellitus 2.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	77.0%	Hospital	6.8 Days
State	21.1%	State	7.3 Days
Outside State	1.9%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	0
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 36.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 53.7 %	Hospice CareYes
Case Mix Index (CMI) 1.1539	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 7	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	RehabilitationNo
Licenseu Fractical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

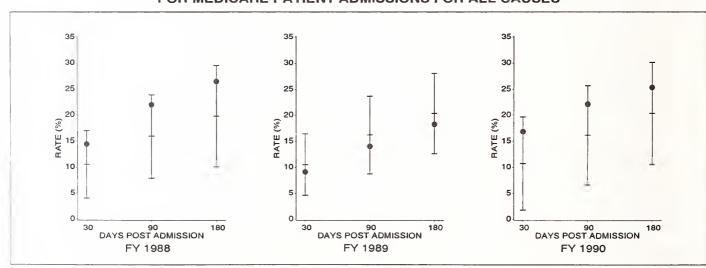
^{*} Not used in calculating mortality rates

COFFEY COUNTY HOSPITAL
801 NORTH 4TH, BOX 189
BURLINGTON, KS 66839
Medicare Provider Number: 170094

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		3	0 DAY	S		0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	95	16.8	10.7	4.5	22.1	16.1	4.8	25.3	20.3	4.9
CONDITIONS:										
Acute Myocardial Infarction	4	25.0	28.2		25.0	31.2		25.0	34.1	
Congestive Heart Failure	11	27.3	16.9		45.5	26.7		45.5	34.2	
Pneumonia/Influenza	13	23.1	12.8		30.8	17.8		30.8	21.5	
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	1	0.0	1.6		0.0	3.8		0.0	6.3	
Stroke	1	0.0	9.4		0.0	13.3		0.0	16.8	
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	3	0.0	0.5		0.0	1.2		0.0	2.2	
Cholecystectomy	1	0.0	1.5		0.0	2.8		0.0	3.6	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



COFFEY COUNTY HOSPITAL Medicare Provider Number: 170094

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

EMOGRAPHICS:	COMORBIDITIES:	
Average age at admission 80.2	2 years Cancer	4.2 %
Proportion female 54.7	7 % Chronic cardiovascular disease	37.9 %
ADMISSION SOURCES/TYPES:	Chronic liver disease	0.0 %
Referred by personal or HMO physician 36.8	3 % Chronic renal disease	3.2 %
Transferred from skilled nursing facility 1.1	% Chronic pulmonary disease	21.1 %
Admitted for elective procedure 49.5	5 % Cerebrovascular degeneration	10.5 %
Admitted for emergency	3 % Diabetes mellitus	8.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSIO	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	79.9%	Hospital	5.0 Days
State	13.2%	State	7.3 Days
Outside State	6.9%	National	8.6 Days
Total	100.0%		

SOURCE: Health Care Financing Administration (OSCAR)**	- Survey Year 1991
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Ownership/Control Local Government	Coronary Care Unit Yes
Case Mix Index (CMI) 1.0202	Hospice Care No
STAFFING:	Intensive Care Unit No
Medical Residents/Interns 0	Organ Transplant Yes
Registered Nurses	Trauma Center No
Licensed Practical Nurses	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/DrugYes
	Rehabilitation No
	Psychiatric No
	Medicare Swing Beds Yes
** Except for CMI	

^{*} Not used in calculating mortality rates

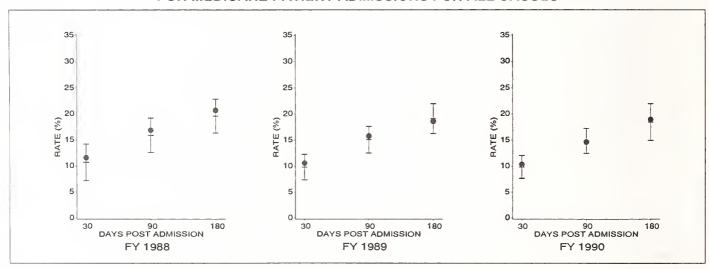
COFFEYVILLE REGIONAL MEDICAL CENTER

1400 W 14TH ST COFFEYVILLE, KS 67337 Medicare Provider Number: 170145

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
		- 3	BO DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	907	10.3	9.8	1.1	14.6	14.8	1.2	18.9	18.4	1.8
CONDITIONS:										
Acute Myocardial Infarction	27	37.0	24.1		37.0	26.8		37.0	29.5	
Congestive Heart Failure	54	16.7	14.9	5.3	20.4	23.7	6.4	27.8	30.2	6.9
Pneumonia/Influenza	81	21.0	16.4	6.0	27.2	22.8	5.3	29.6	27.0	5.1
Chronic Obstructive Pulmonary Disease	13	23.1	8.7		23.1	15.1		23.1	19.9	
Transient Cerebral Ischemia	16	0.0	1.5		0.0	3.6		6.3	6.1	
Stroke	33	18.2	21.7		30.3	27.9		33.3	31.7	
Hip Fracture	29	6.9	4.8		6.9	9.2		6.9	12.5	
Sepsis	16	0.0	19.3		12.5	25.7		12.5	29.2	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	2	0.0	3.2		0.0	6.6		0.0	9.5	
Carotid Endarterectomy	8	0.0	2.2		0.0	4.5		0.0	7.0	
Hip Replacement/Reconstruction	11	9.1	5.1		9.1	9.8		9.1	13.2	
Open Reduction of Hip Fracture	6	16.7	3.6	•••••	16.7	6.9		16.7	9.5	
Prostatectomy	47	2.1	0.7		2.1	1.6		6.4	2.6	
Cholecystectomy	18	0.0	3.7		0.0	7.5		0.0	10.8	
Hysterectomy	3	0.0	1.0		0.0	2.1		0.0	3.2	*****

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



COFFEYVILLE REGIONAL MEDICAL CENTER Medicare Provider Number: 170145

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	76.6 years	Cancer	7.9 %
Proportion female	59.1 %	Chronic cardiovascular disease	35.4 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.8 %
Referred by personal or HMO physician	43.0 %	Chronic renal disease	4.0 %
Transferred from skilled nursing facility	0.7 %	Chronic pulmonary disease	16.3 %
Admitted for elective procedure	15.4 %	Cerebrovascular degeneration	3.7 %
Admitted for emergency	2.9 %	Diabetes mellitus	9.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	84.5%	Hospital	7.3 Days
State	7.7%	State	7.3 Days
Outside State	7.8%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 62.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges(Not Available)	Hospice Care No
Case Mix Index (CMI) 1.1783	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
	PsychiatricYes
** Except for CMI	Medicare Swing Beds Yes

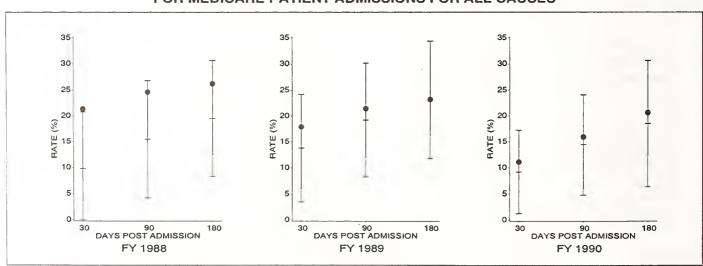
^{*} Not used in calculating mortality rates

COMANCHE COUNTY HOSPITAL 2ND & FRISCO STS COLDWATER, KS 67029 Medicare Provider Number: 170036

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	63	11.1	9.2	4.0	15.9	14.4	4.8	20,6	18.5	6.1
CONDITIONS:										
Acute Myocardial Infarction	2	50.0	18.2		50.0	21.5		50.0	25.6	
Congestive Heart Failure	2	50.0	12.4		50.0	21.2		50.0	27.5	
Pneumonia/Influenza	5	0.0	15.5		0.0	22.1		0.0	26.8	
Chronic Obstructive Pulmonary Disease	1	0.0	8.5		0.0	16.3		0.0	23.6	
Transient Cerebral Ischemia	1	0.0	3.6		0.0	8.7		0.0	15.1	
Stroke	4	25.0	16.5		25.0	22.5		50.0	27.0	
Hip Fracture	1	0.0	5.0		0.0	10.4		0.0	14.8	
Sepsis	3	0.0	32.2		0.0	49.2		0.0	57.5	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



COMANCHE COUNTY HOSPITAL Medicare Provider Number: 170036

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:
Average age at admission 81.6 years	Cancer 1.6 %
Proportion female 47.6 %	Chronic cardlovascular disease 36.5 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.0 %
Referred by personal or HMO physician 92.1 %	Chronic renal disease 3.2 %
Transferred from skilled nursing facility 0.0 %	Chronic pulmonary disease 12.7 %
Admitted for elective procedure 17.5 %	Cerebrovascular degeneration 20.6 %
Admitted for emergency 1.6 %	Diabetes mellitus 4.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSIO	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	89.0%	Hospital	3.9 Days
State	4.0%	State	7.3 Days
Outside State	7.0%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 21.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 61.4 %	Hospice Care No
Case Mix Index (CMI) 0.8410	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 3	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation
Electrical Factor Hardes	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

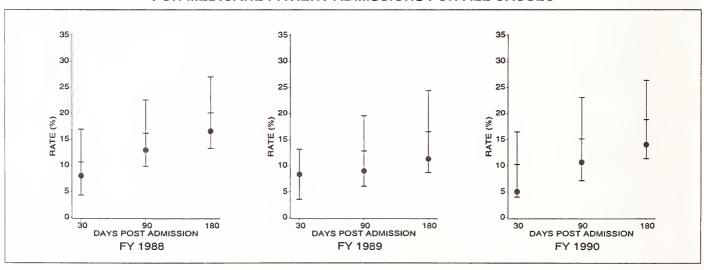
^{*} Not used in calculating mortality rates

COMMUNITY HOSPITAL ONAGA INC 120 W EIGHTH ST ONAGA, KS 66521 Medicare Provider Number: 170045

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)										
		30 DAYS			9	90 DAYS			180 DAYS			
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*		
ALL CAUSES	179	5.0	10.2	3.1	10.6	15.1	4.0	14.0	18.8	3.7		
CONDITIONS:												
Acute Myocardial Infarction	2	0.0	21.5		0.0	25.6		0.0	29.9			
Congestive Heart Failure	5	0.0	12.7		0.0	19.8		20.0	26.5			
Pneumonia/Influenza	20	15.0	16.3		15.0	23.1		15.0	27.3			
Chronic Obstructive Pulmonary Disease	2	0.0	9.5		0.0	17.8		50.0	23.9			
Transient Cerebral Ischemia	3	0.0	1.2		0.0	3.0		0.0	5.0			
Stroke	8	0.0	20.2		0.0	25.4		12.5	29.6			
Hip Fracture	0											
Sepsis	6	33.3	20.9		33.3	29.2		33.3	34.0			
PROCEDURES:												
Angioplasty	0											
Coronary Artery Bypass Graft	0											
Initial Pacemaker Insertion	0											
Carotid Endarterectomy	0											
Hip Replacement/Reconstruction	0											
Open Reduction of Hip Fracture	0											
Prostatectomy	7	0.0	0.7		14.3	1.9		14.3	3.6			
Cholecystectomy	3	0.0	1.5		0.0	2.5		0.0	3.3			
Hysterectomy	1	0.0	0.5		0.0	1.2		0.0	2.1			

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



COMMUNITY HOSPITAL ONAGA INC Medicare Provider Number: 170045

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	79.4 years	Cancer	2.8 %
Proportion female	55.3 %	Chronic cardiovascular disease	46.4 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.6 %
Referred by personal or HMO physician	68.7 %	Chronic renal disease	0.6 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	11.2 %
Admitted for elective procedure	8.9 %	Cerebrovascular degeneration	3.9 %
Admitted for emergency	0.0 %	Diabetes mellitus	5.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSIO	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	58.2%	Hospital	4.1 Days
State	41.2%	State	7.3 Days
Outside State	0.6%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990)
PROFILE:	SPECIALTY SERVICES: Burn Unit No
Occupancy Rate	Cardiac Intensive Care
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

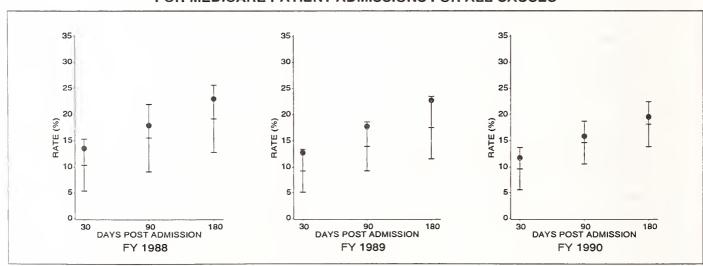
COMMUNITY MEMORIAL HOSPITAL

708 N 18TH ST MARYSVILLE, KS 66508 Medicare Provider Number: 170113

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
		3	30 DAY	s	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	385	11.7	9.6	2.0	15.8	14.6	2.1	19.5	18.1	2.1
CONDITIONS:										
Acute Myocardial Infarction	13	15.4	24.0		15.4	27.3		15.4	30.5	
Congestive Heart Failure	14	21.4	20.4		28.6	32.1		28.6	38.9	
Pneumonia/Influenza	39	20.5	13.8		28.2	18.9		33.3	22.5	
Chronic Obstructive Pulmonary Disease	3	0.0	9.6		0.0	17.2		0.0	21.9	
Transient Cerebral Ischemia	6	0.0	1.6		0.0	4.1		0.0	7.1	
Stroke	12	33.3	17.0		33.3	23.7		41.7	27.4	
Hip Fracture	18	5.6	5.7		11.1	9.9	••••	11.1	12.9	
Sepsis	7	14.3	30.5		28.6	38.3		28.6	43.4	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	11	0.0	3.6		0.0	6.8		0.0	9.4	
Open Reduction of Hip Fracture	6	0.0	3.8	•••••	0.0	7.5		0.0	10.0	
Prostatectomy	13	0.0	0.7		0.0	1.5		0.0	2.7	
Cholecystectomy	5	20.0	4.1		20.0	8.4		20.0	11.2	
Hysterectomy	1	0.0	0.0		0.0	0.1		0.0	0.2	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



COMMUNITY MEMORIAL HOSPITAL Medicare Provider Number: 170113

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

EMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	78.6 years	Cancer	5.2 %
Proportion female	54.5 %	Chronic cardiovascular disease	30.6 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.3 %
Referred by personal or HMO physician	60.0 %	Chronic renal disease	3.9 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	11.7 %
Admitted for elective procedure	14.0 %	Cerebrovascular degeneration	2.6 %
Admitted for emergency	0.3 %	Diabetes mellitus	3.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

PRIGIN OF MEDICARE PATIENT ADMISSION	۷:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	82.5%	Hospital	6.2 Days
State	14.4%	State	7.3 Days
Outside State	3.1%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds 55	Burn Unit No
Occupancy Rate 30.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric Yes
Medicare Discharges 34.2 %	Hospice Care No
Case Mix Index (CMI) 1.1175	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 7	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses 19	Alcohol/DrugNo
Licensed Practical Nurses	Rehabilitation No
Licensed Fractical Nuises	Psychlatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

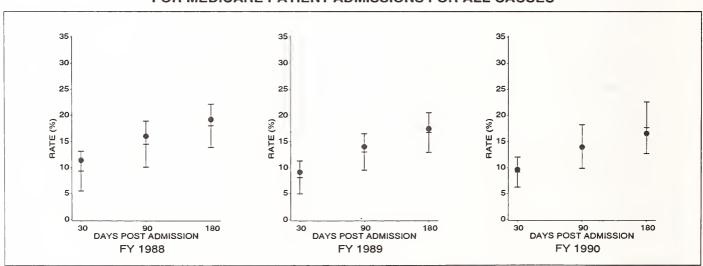
CUSHING MEMORIAL HOSPITAL

623 MARSHALL ST LEAVENWORTH, KS 66048 Medicare Provider Number: 170133

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		3	BO DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	417	9.6	9.1	1.5	13.9	14.0	2.1	16.5	17.6	2.5
CONDITIONS:										
Acute Myocardial Infarction	12	33.3	35.6		50.0	38.5		50.0	41.2	
Congestive Heart Failure	24	12.5	15.4		12.5	24.6		20.8	30.7	
Pneumonia/Influenza	41	4.9	16.1		19.5	22.4		22.0	26.0	
Chronic Obstructive Pulmonary Disease	3	33.3	10.9		33.3	20.3		33.3	27.1	
Transient Cerebral Ischemia	4	0.0	1.3		0.0	2.6		25.0	3.9	
Stroke	4	25.0	24.6		25.0	31.0		25.0	34.0	
Hip Fracture	16	12.5	3.5		12.5	6.5		12.5	9.1	
Sepsis	12	25.0	20.4		33.3	28.2		33.3	32.2	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	2	0.0	1.4		0.0	2.8		0.0	4.4	
Carotid Endarterectomy	3	0.0	1.3		0.0	2.3		0.0	3.3	
Hip Replacement/Reconstruction	13	15.4	3.2		15.4	6.3		15.4	8.9	
Open Reduction of Hip Fracture	4	0.0	2.9		0.0	5.4		0.0	7.5	
Prostatectomy	15	0.0	1.1		0.0	2.7		0.0	4.7	
Cholecystectomy	8	12.5	1.6		12.5	3.1		12.5	4.5	
Hysterectomy	2	0.0	1.5		0.0	4.0		0.0	6.9	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



CUSHING MEMORIAL HOSPITAL Medicare Provider Number: 170133

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	76.3 years	Cancer	6.0 %
Proportion female	64.3 %	Chronic cardiovascular disease	33.8 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.0 %
Referred by personal or HMO physician	54.4 %	Chronic renal disease	2.4 %
Transferred from skilled nursing facility	0.2 %	Chronic pulmonary disease	19.9 %
Admitted for elective procedure	26.1 %	Cerebrovascular degeneration	4.6 %
Admitted for emergency	26.1 %	Diabetes mellitus	6.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	85.7%	Hospital	7.9 Days
State	7.8%	State	7.3 Days
Dutside State	6.5%	National	8.6 Days
otal	100.0%		

PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit N
Ownership.Control Private, Non-Profit	Coronary Care UnitYe
Case Mix Index (CMI) 1.2408	Hospice CareYe
STAFFING:	Intensive Care UnitYe
Medical Residents/Interns	Organ Transplant N
Registered Nurses	Trauma Center N
Licensed Practical Nurses	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/DrugYe
	Rehabilitation N
	Psychiatric Ye
	Medicare Swing Beds N

^{*} Not used in calculating mortality rates

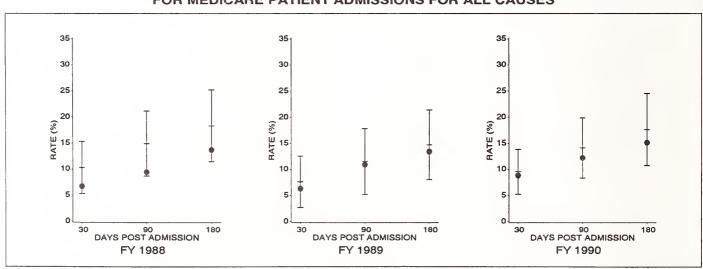
DECATUR COUNTY HOSPITAL

810 W COLUMBIA OBERLIN, KS 67749 Medicare Provider Number: 170060

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				M	ORTALIT	Y RATE	S (%)			
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	>
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	205	8.8	9.5	2.1	12.2	14.1	2.9	15.1	17.6	3.5
CONDITIONS:										
Acute Myocardial Infarction	2	50.0	33.7		50.0	38.6		50.0	43.9	
Congestive Heart Failure	11	18.2	15.1		18.2	23.5		18.2	29.7	
Pneumonia/Influenza	17	0.0	18.4		11.8	24.5		17.6	28.8	
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	2	0.0	1.3		0.0	2.9		0.0	4.7	
Stroke	8	12.5	21.6		25.0	30.7		25.0	35.1	
Hip Fracture	1	0.0	8.2		0.0	13.8	••••	0.0	16.2	
Sepsis	2	100.0	39.2		100.0	45.2	•	100.0	50.8	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	3	0.0	3.6		0.0	7.2		0.0	10.4	
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	1	0.0	9.8	••••	0.0	16.4		0.0	19.3	
Open Reduction of Hip Fracture	0									
Prostatectomy	5	0.0	0.9		0.0	2.4		0.0	4.4	
Cholecystectomy	1	0.0	1.3		0.0	2.0		0.0	2.6	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



DECATUR COUNTY HOSPITAL Medicare Provider Number: 170060

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:	
Average age at admission 80.0 years	Cancer	3.4 %
Proportion female 60.7 %	Chronic cardiovascular disease	44.7 %
ADMISSION SOURCES/TYPES:	Chronic liver disease	0.0 %
Referred by personal or HMO physiclan 57.3 %	Chronic renal disease	2.9 %
Transferred from skilled nursing facility 1.9 %	Chronic pulmonary disease	14.1 %
Admitted for elective procedure 8.7 %	Cerebrovascular degeneration	2.9 %
Admitted for emergency 66.0 %	Diabetes mellitus	4.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

N:	MEDICARE AVERAGE LENGTH OF STAY:	
72.9%	Hospital	5.6 Days
20.8%	State	7.3 Days
6.3%	National	8.6 Days
100.0%		
	72.9% 20.8% 6.3%	72.9% Hospital

ROFILE:	ODECIAL TV OEDVICEO.
	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 68.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric Yes
Medicare Discharges 52.9 %	Hospice Care No
Case Mix Index (CMI) 1.0065	Medical/Surgical Intensive Care No
TAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/DrugNo
Registered Nurses 13	Rehabilitation
Licensed Practical Nurses 2	
	Psychlatric No

^{*} Not used in calculating mortality rates

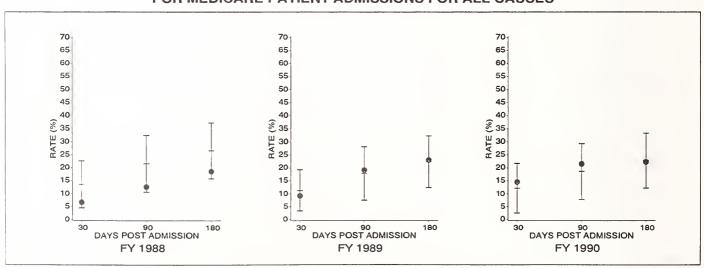
DECHAIRO HOSPITAL

208 NORTH FIRST WESTMORELAND, KS 66549 Medicare Provider Number: 170044

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				M	ORTALIT	Y RATE	S (%)			
		:	30 DAY	S	9	0 DAYS	5	18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	131	14.5	12.1	4.8	21.4	18.5	5.4	22.1	22.7	5.3
CONDITIONS:										
Acute Myocardial Infarction	2	100.0	29.8		100.0	34.5		100.0	37.3	
Congestive Heart Failure	10	0.0	13.1		0.0	20.9		0.0	27.0	
Pneumonia/Influenza	20	15.0	14.2		20.0	19.3		20.0	23.0	
Chronic Obstructive Pulmonary Disease	1	0.0	13.7		0.0	22.6		0.0	27.1	
Transient Cerebral Ischemia	0									
Stroke	5	20.0	22.1		20.0	28.7		20.0	32.3	
Hip Fracture	1	100.0	27.0		100.0	47.0		100.0	58.4	
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	11	0.0	0.6		0.0	1.4		0.0	2.5	•••••
Cholecystectomy	2	0.0	2.4		0.0	4.9		0.0	6.5	
Hysterectomy	1	0.0	0.0		0.0	0.1	••••	0.0	0.2	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



DECHAIRO HOSPITAL Medicare Provider Number: 170044

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission 78	8.9 years	Cancer	9.2 %
Proportion female 49	9.6 %	Chronic cardiovascular disease	45.0 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.5 %
Referred by personal or HMO physician 53	3.4 %	Chronic renal disease	3.1 %
Transferred from skilled nursing facility	0.8 %	Chronic pulmonary disease	17.6 %
Admitted for elective procedure 10	0.7 %	Cerebrovascular degeneration	3.1 %
Admitted for emergency 22	2.1 %	Diabetes mellitus	5.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	48.9%	Hospital	5.4 Days
State	48.4%	State	7.3 Days
Outside State	2.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	90
PROFILE: Total Beds	SPECIALTY SERVICES: Burn Unit No Cardiac Intensive Care No Comprehensive Geriatric Yes Hospice Care No Medical/Surgical Intensive Care No Organ/Tissue Transplant No Other Intensive Care No Trauma Center No OTHER SPECIALTY/HOSPITAL-BASED SERVICES: Alcohol/Drug No Rehabilitation No
** Except for CMI	Psychiatric

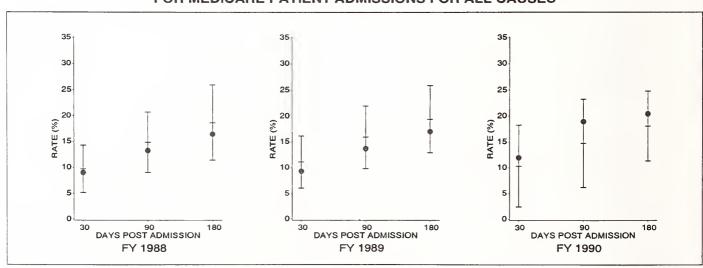
^{*} Not used in calculating mortality rates

DISTRICT HOSPITAL 4-STAFFORD
502 S BUCKEYE
STAFFORD, KS 67578
Medicare Provider Number: 170038

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				МС	ORTALIT	Y RATE	S (%)			
		3	BO DAY	S	9	0 DAYS	3	18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	201	11.9	10.3	4.0	18.9	14.7	4.3	20.4	18.0	3.4
CONDITIONS:										
Acute Myocardial Infarction	13	30.8	31.5		46.2	34.4		46.2	37.6	
Congestive Heart Failure	10	20.0	12.9		30.0	20.9		30.0	27.5	
Pneumonia/Influenza	18	11.1	15.9		11.1	21.8		16.7	25.8	
Chronic Obstructive Pulmonary Disease	3	0.0	4.4		0.0	8.0		0.0	11.1	
Transient Cerebral Ischemia	12	0.0	2.3	••••	0.0	5.5	••••	8.3	9.3	
Stroke	4	25.0	19.7		75.0	27.8		75.0	32.6	
Hip Fracture	1	0.0	3.9		0.0	7.4		0.0	9.8	
Sepsis	3	0.0	22.2		33.3	32.7		33.3	37.4	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	7	14.3	0.7	••••	14.3	1.5		14.3	2.6	
Cholecystectomy	2	50.0	1.0		50.0	1.8		50.0	2.2	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



DISTRICT HOSPITAL 4-STAFFORD

Medicare Provider Number: 170038

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	77.6 years	Cancer	2.5 %
Proportion female	51.7 %	Chronic cardiovascular disease	42.3 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.0 %
Referred by personal or HMO physician	65.7 %	Chronic renal disease	2.0 %
Transferred from skilled nursing facility	1.0 %	Chronic pulmonary disease	12.4 %
Admitted for elective procedure	10.9 %	Cerebrovascular degeneration	5.5 %
Admitted for emergency	5.0 %	Diabetes mellitus	7.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	78.1%	Hospital	5.4 Days
State	21.4%	State	7.3 Days
Outside State	0.5%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 36.0 %	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Geriatric No
Medicare Discharges(Not Available)	Hospice Care No
Case Mix Index (CMI) 0.9399	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug No
	Rehabilitation No
Licensed Practical Nurses 1	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

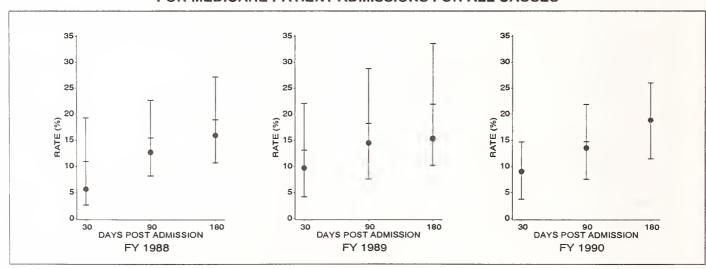
^{*} Not used in calculating mortality rates

EDWARDS COUNTY HOSPITAL
620 W 8TH ST
KINSLEY, KS 67547
Medicare Provider Number: 170072

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	,			M	IORTALIT	Y RATE	S (%)			
			30 DAY	s	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	133	9.0	9.2	2.7	13.5	14.7	3.6	18.8	18.7	3.7
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	11	9.1	18.9		18.2	29.6		27.3	37.5	
Pneumonia/Influenza	14	21.4	18.3		28.6	25.7		28.6	30.2	
Chronic Obstructive Pulmonary Disease	2	0.0	6.1		0.0	12.0		0.0	16.8	
Transient Cerebral Ischemia	1	0.0	0.8		0.0	2.1		0.0	3.6	
Stroke	3	0.0	20.7		0.0	28.5		0.0	33.4	
Hip Fracture	0									
Sepsis	1	100.0	22.5		100.0	27.0		100.0	33.1	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	4	0.0	1.8		0.0	3.1		0.0	4.3	
Hysterectomy	2	0.0	0.4	•	0.0	0.7		0.0	1.1	*****

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



EDWARDS COUNTY HOSPITAL Medicare Provider Number: 170072

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	79.7 years	Cancer	6.8 %
Proportion female	52.6 %	Chronic cardiovascular disease	36.1 %
DMISSION SOURCES/TYPES:		Chronic liver disease	0.8 %
Referred by personal or HMO physician	58.6 %	Chronic renal disease	0.8 %
Transferred from skilled nursing facility	0.8 %	Chronic pulmonary disease	15.8 %
Admitted for elective procedure	10.5 %	Cerebrovascular degeneration	1.5 %
Admitted for emergency	0.8 %	Diabetes mellitus	9.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

County/City	88.1%	Hospital	4.6 Day
State	10.9%	State	7.3 Day
Outside State	1.0%	National	8.6 Day
Total	********		0.0

ROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 24.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 39.7 %	Hospice Care No
Case Mix Index (CMI) 0.9088	Medical/Surgical Intensive Care No
TAFFING:	Organ/Tissue Transplant No
Total Number of Physicians2	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/DrugNo
Registered Nurses	RehabilitationNo
Licenseu Flactical Nuises	Psychiatric No

^{*} Not used in calculating mortality rates

ELLINWOOD DISTRICT HOSPITAL

605 NORTH MAIN ELLINWOOD, KS 67526 Medicare Provider Number: 170062

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	5
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	76	19.7	11.4	4.7	23.7	16.7	5.0	25.0	20.7	5.2
CONDITIONS:										
Acute Myocardial Infarction	3	100.0	28.7		100.0	32.6		100.0	36.0	
Congestive Heart Failure	8	25.0	14.7		25.0	22.7		25.0	29.2	
Pneumonia/Influenza	13	23.1	14.7		23.1	20.7		23.1	24.8	
Chronic Obstructive Pulmonary Disease	2	0.0	3.7		50.0	6.8		50.0	9.5	
Transient Cerebral Ischemia	1	0.0	0.7		0.0	1.8		0.0	3.2	
Stroke	1	0.0	14.6		0.0	19.4		0.0	23.6	
Hip Fracture	0									
Sepsis	2	50.0	39.9		50.0	44.9		50.0	49.5	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

ELLINWOOD DISTRICT HOSPITAL Medicare Provider Number: 170062

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	80.3 years	Cancer	1.3 %
Proportion female	55.3 %	Chronic cardiovascular disease	30.3 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	85.5 %	Chronic renal disease	3.9 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	17.1 %
Admitted for elective procedure	11.8 %	Cerebrovascular degeneration	2.6 %
Admitted for emergency	0.0 %	Diabetes mellitus	9.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	87.7%	Hospital	4.1 Days
State	8.2%	State	7.3 Days
Outside State	4.1%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds 24	Burn Unit No
Occupancy Rate 37.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 61.1 %	Hospice Care No
Case Mix Index (CMI) 0.9286	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 1	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Listing Translative Translativ	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

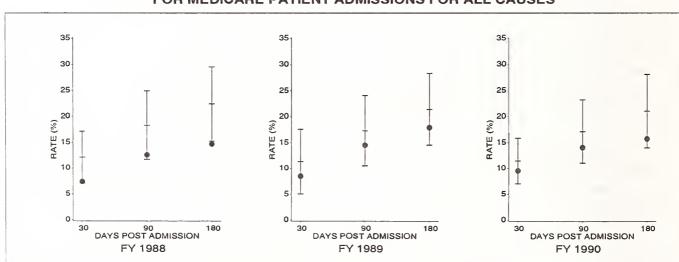
ELLSWORTH COUNTY VETERANS MEM HOSPITAL

300 KINGSLEY ELLSWORTH, KS 67439 Medicare Provider Number: 170088

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	ORTALIT	Y RATE	ES (%)				
			30 DAYS		9	90 DAYS			180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	242	9.5	11.4	2.2	14.0	17.1	3.0	15.7	21.0	3.5	
CONDITIONS:											
Acute Myocardial Infarction	6	33.3	26.1		33.3	30.6		50.0	34.3		
Congestive Heart Failure	9	0.0	13.8		0.0	22.8		22.2	30.4		
Pneumonia/Influenza	29	3.4	12.8		10.3	17.4		10.3	20.7		
Chronic Obstructive Pulmonary Disease	2	0.0	5.6		0.0	10.9		0.0	14.6		
Transient Cerebral Ischemia	3	0.0	1.2		0.0	2.8		0.0	4.5		
Stroke	8	25.0	23.1		25.0	31.5		25.0	36.5		
Hip Fracture	0										
Sepsis	5	20.0	20.4		40.0	25.7		40.0	29.5		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	0										
Open Reduction of Hip Fracture	0										
Prostatectomy	1	0.0	1.9		0.0	4.0		0.0	6.8		
Cholecystectomy	6	0.0	6.9		0.0	12.5		0.0	15.5		
Hysterectomy	2	0.0	1.4		0.0	3.1		0.0	4.4		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



ELLSWORTH COUNTY VETERANS MEM HOSPITAL Medicare Provider Number: 170088

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	78.9 years	Cancer	7.0 %
Proportion female	59.5 %	Chronic cardiovascular disease	37.6 %
DMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	50.8 %	Chronic renal disease	8.3 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	12.8 %
Admitted for elective procedure	1.7 %	Cerebrovascular degeneration	4.1 %
Admitted for emergency	9.5 %	Diabetes mellitus	6.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	88.5%	Hospital	5.4 Days
State	11.0%	State	7.3 Days
Outside State	0.5%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 59.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive GeriatricYes
Medicare Discharges(Not Available)	Hospice CareYes
Case Mix Index (CMI) 1.0062	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians (Not Available)	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
Medical Residents/Interns(Not Available)	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses(Not Available)	Alcohol/Drug No
Licensed Practical Nurses (Not Available)	RehabilitationNo
Licensed Fractical Nuises (Not Available)	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

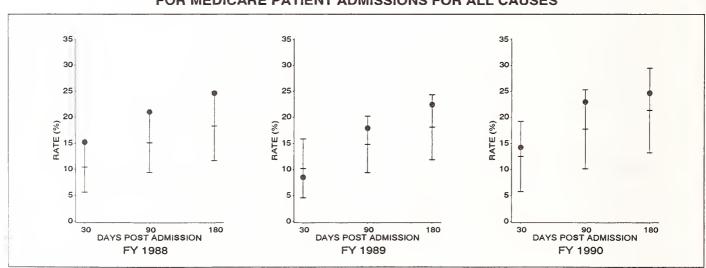
FREDONIA REGIONAL HOSPITAL

1527 MADISON, BOX 579 FREDONIA, KS 66736 Medicare Provider Number: 170018

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		;	30 DAY	s	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	овѕ	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	240	14.2	12.5	3.4	22.9	17.7	3.8	24.6	21.3	4.1
CONDITIONS:										
Acute Myocardial Infarction	21	19.0	29.7		28.6	32.2		28.6	34.9	
Congestive Heart Failure	12	8.3	15.1		16.7	22.4	•••••	25.0	28.0	
Pneumonia/Influenza	26	15.4	12.8		23.1	17.6		23.1	21.2	
Chronic Obstructive Pulmonary Disease	5	20.0	13.9		60.0	20.6		60.0	25.3	
Transient Cerebral Ischemia	2	0.0	0.9		0.0	2.0		0.0	3.3	
Stroke	16	18.8	20.5		25.0	27.9		31.3	32.0	
Hip Fracture	5	20.0	5.4		20.0	9.7		20.0	13.0	
Sepsis	1	0.0	18.3		0.0	22.0		0.0	25.7	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	4	25.0	4.7		25.0	8.4		25.0	11.3	
Prostatectomy	2	0.0	0.2	••••	0.0	0.5		0.0	0.8	
Cholecystectomy	8	12.5	1.8		12.5	3.0		12.5	3.8	
Hysterectomy	1	0.0	0.0		0.0	0.1		0.0	0.2	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



FREDONIA REGIONAL HOSPITAL Medicare Provider Number: 170018

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

EMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	. 77.3 years	Cancer	8.3 %
Proportion female	49.2 %	Chronic cardiovascular disease	42.1 %
DMISSION SOURCES/TYPES:		Chronic liver disease	0.4 %
Referred by personal or HMO physician	52.1 %	Chronic renal disease	3.3 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	12.1 %
Admitted for elective procedure	. 13.3 %	Cerebrovascular degeneration	2.5 %
Admitt/-d for emergency	2.1 %	Diabetes mellitus	10.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City72.6%	Hospital 6.8 Days	\$
State	State 7.3 Days	s
Outside State	National 8.6 Days	3
Total		

PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 28.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 64.8 %	Hospice Care No
Case Mix Index (CMI) 1.0715	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/DrugNo
Licensed Practical Nurses	Rehabilitation No
Licensed Fractical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds Y

^{*} Not used in calculating mortality rates

GEARY COMMUNITY HOSPITAL

1102 SAINT MARYS RD

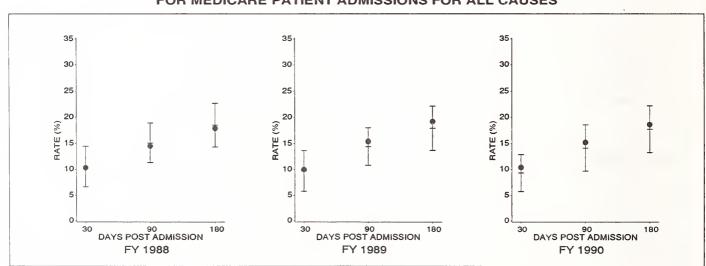
JUNCTION CITY, KS 66441

Medicare Provider Number: 170074

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
		3	BO DAY	S	9	0 DAYS	•	18	O DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	415	10.4	9.3	1.8	15.2	14.1	2.2	18.6	17.7	2.2
CONDITIONS:										
Acute Myocardial Infarction	19	26.3	26.5		36.8	29.0		36.8	32.0	
Congestive Heart Failure	24	12.5	14.3		20.8	22.6		29.2	28.8	
Pneumonia/Influenza	34	11.8	14.1		20.6	19.7		20.6	23.7	
Chronic Obstructive Pulmonary Disease	3	33.3	9.5		33.3	16.9		33.3	22.5	
Transient Cerebral Ischemia	3	33.3	3.9		33.3	9.8		33.3	15.9	
Stroke	13	53.8	25.6		61.5	35.4		61.5	41.0	
Hip Fracture	13	7.7	8.4		15.4	15.6		23.1	20.6	
Sepsis	11	9.1	27.3		27.3	36.8		36.4	42.3	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	1	0.0	0.9		0.0	1.7		0.0	2.6	
Hip Replacement/Reconstruction	7	0.0	5.6		0.0	10.3		0.0	13.8	
Open Reduction of Hip Fracture	9	11.1	6.6		22.2	13.1		33.3	17.7	
Prostatectomy	15	6.7	1.1		6.7	2.6		6.7	4.5	
Cholecystectomy	3	0.0	1.5		0.0	2.6		0.0	3.2	
Hysterectomy	6	0.0	1.3		0.0	3.1		0.0	5.1	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



GEARY COMMUNITY HOSPITAL Medicare Provider Number: 170074

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	76.7 years	Cancer	7.2 %
Proportion female	56.4 %	Chronic cardiovascular disease	30.6 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.7 %
Referred by personal or HMO physician	43.6 %	Chronic renal disease	1.2 %
Transferred from skilled nursing facility	2.4 %	Chronic pulmonary disease	15.2 %
Admitt@d for elective procedure	19.3 %	Cerebrovascular degeneration	5.5 %
Admitted for emergency	6.7 %	Diabetes mellitus	4.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	l:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	78.8%	Hospital	6.3 Days
State	18.5%	State	7.3 Days
Outside State	2.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	90
PROFILE:	SPECIALTY SERVICES:
Total Beds 58	Burn Unit No
Occupancy Rate 43.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 41.4 %	Hospice Care No
Case Mix Index (CMI) 1.1234	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 11	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns 0	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/DrugYes
Licensed Practical Nurses	RehabilitationNo
Liberious radioa radioa maria Li	Psychiatric No
** Except for CMI	Medicare Swing Beds No

^{*} Not used in calculating mortality rates

GOVE COUNTY HOSPITAL

5TH & GARFIELD

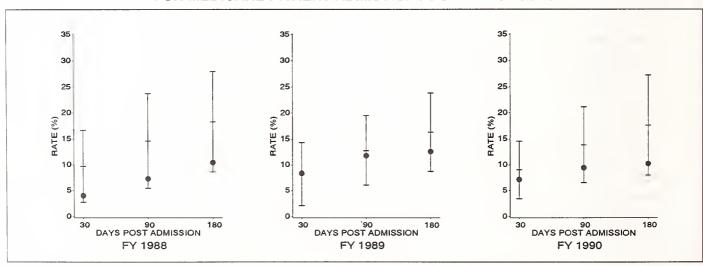
QUINTER, KS 67752

Medicare Provider Number: 170080

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
			30 DAYS			90 DAYS			180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	127	7.1	9.0	2.8	9.4	13.8	3.7	10.2	17.6	4.8	
CONDITIONS:											
Acute Myocardial Infarction	3	33.3	18.8		33.3	28.4		33.3	34.6		
Congestive Heart Failure	9	0.0	12.6		0.0	20.0		11.1	26.1		
Pneumonia/Influenza	24	16.7	14.1		20.8	19.8		20.8	23.4		
Chronic Obstructive Pulmonary Disease	4	0.0	4.9		0.0	9.4		0.0	12.7		
Transient Cerebral Ischemia	3	0.0	2.3		0.0	4.9		0.0	8.2		
Stroke	0										
Hip Fracture	1	0.0	8.8		100.0	19.1		100.0	26.9		
Sepsis	1	100.0	73.1		100.0	80.1		100.0	85.8		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	0										
Open Reduction of Hip Fracture	0										
Prostatectomy	0										
Cholecystectomy	0										
Hysterectomy	0										

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



GOVE COUNTY HOSPITAL

Medicare Provider Number: 170080

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	70.0	COMORBIDITIES:	0.4.0/
Average age at admission	76.6 years	Cancer	9.4 %
Proportion female	53.5 %	Chronic cardiovascular disease	37.8 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	56.7 %	Chronic renal disease	0.0 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	23.6 %
Admitted for elective procedure	0.0 %	Cerebrovascular degeneration	3.1 %
Admitted for emergency	0.0 %	Diabetes mellitus	6.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	76.2%	Hospital	5.4 Days
State	23.8%	State	7.3 Days
Outside State	0.0%	National	8.6 Days
Total	100.0%		

SOURCE: Health Care Financing Administration (OSCAR)	** - Survey Year 1991
PROFILE:	SPECIALTY SERVICES:
Total Beds 21	Burn Unit No
Ownership/Control Local Government	Coronary Care Unit No
Case Mix Index (CMI) 0.9763	Hospice Care No
STAFFING:	Intensive Care Unit No
Medical Residents/Interns 0	Organ Transplant No
Registered Nurses 5	Trauma Center No
Licensed Practical Nurses	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug No
	Rehabilitation No
	Psychiatric No
	Medicare Swing Beds Yes
** Except for CMI	

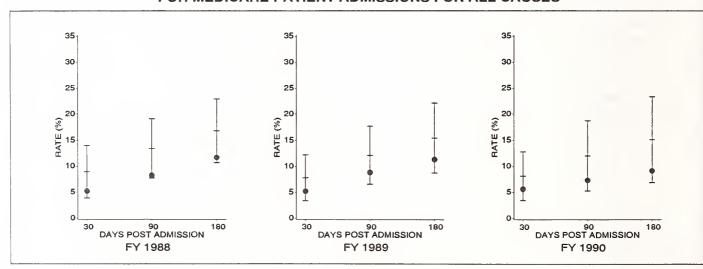
^{*} Not used in calculating mortality rates

GRAHAM COUNTY HOSPITAL
304 W PROUT ST
HILL CITY, KS 67642
Medicare Provider Number: 170031

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		3	O DAY	s	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	232	5.6	8.1	2.3	7.3	12.0	3.4	9.1	15.1	4.1
CONDITIONS:										
Acute Myocardial Infarction	4	75.0	38.0		75.0	41.7		75.0	44.5	
Congestive Heart Failure	23	4.3	12.9		8.7	20.7		8.7	27.1	
Pneumonia/Influenza	31	9.7	15.9		9.7	21.0		12.9	24.5	
Chronic Obstructive Pulmonary Disease	8	12.5	14.0		25.0	25.0		37.5	32.6	
Transient Cerebral Ischemia	5	0.0	1.7		0.0	4.0		0.0	6.5	
Stroke	2	0.0	12.4		0.0	16.7		0.0	19.3	
Hip Fracture	0									
Sepsis	1	0.0	10.4		0.0	16.4		0.0	21.9	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	5	0.0	1.0		0.0	1.8		0.0	2.5	
Hysterectomy	2	0.0	0.3		0.0	0.7		0.0	1.1	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



GRAHAM COUNTY HOSPITAL Medicare Provider Number: 170031

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

EMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	75.9 years	Cancer	3.4 %
Proportion female	57.8 %	Chronic cardiovascular disease	39.2 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.4 %
Referred by personal or HMO physician	97.4 %	Chronic renal disease	2.2 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	17.7 %
Admitted for elective procedure	4.3 %	Cerebrovascular degeneration	2.6 %
Admitted for emergency	0.0 %	Diabetes mellitus	5.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	72.4%	Hospital	7.4 Days
State	25.9%	State	7.3 Days
Outside State	1.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 33.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 51.1 %	Hospice Care No
Case Mix Index (CMI) 0.9115	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 3	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Licensed Fractical Nurses	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

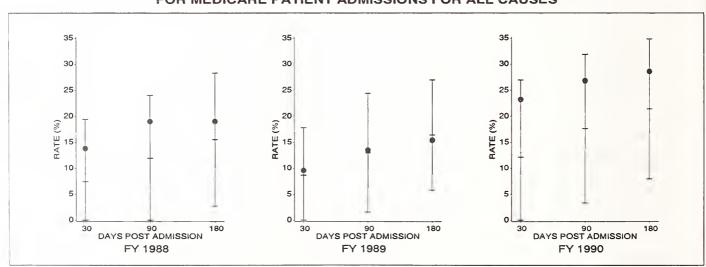
GREELEY COUNTY HOSPITAL

506 THIRD TRIBUNE, KS 67879 Medicare Provider Number: 170082

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
		3	O DAY	s	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	56	23.2	12.1	7.4	26.8	17.6	7.1	28.6	21.4	6.7
CONDITIONS:										
Acute Myocardial Infarction	2	0.0	21.8		0.0	25.9		0.0	29.1	
Congestive Heart Failure	2	0.0	12.7		50.0	20.4		50.0	26.6	
Pneumonia/Influenza	6	16.7	11.4		16.7	16.5		16.7	20.5	
Chronic Obstructive Pulmonary Disease	3	33.3	3.3		33.3	6.8		33.3	9.9	
Transient Cerebral Ischemia	1	0.0	1.7		0.0	4.2		0.0	7.4	
Stroke	2	50.0	17.7		50.0	22.1		50.0	25.9	
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	2	0.0	0.3		0.0	0.6		0.0	0.8	
Hysterectomy	2	0.0	0.0		0.0	0.1		0.0	0.2	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



GREELEY COUNTY HOSPITAL Medicare Provider Number: 170082

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	76.6 years	Cancer	7.1 %
Proportion female	46.4 %	Chronic cardiovascular disease	53.6 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	3.6 %
Referred by personal or HMO physician	25.0 %	Chronic renal disease	3.6 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	14.3 %
Admitted for elective procedure	85.7 %	Cerebrovascular degeneration	1.8 %
Admitted for emergency	8.9 %	Diabetes mellitus	10.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City 57.7%	Hospital 4.4 Days	
State	State 7.3 Days	
Outside State	National 8.6 Days	
Total 100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	989
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 16.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 34.2 %	Hospice Care No
Case Mix Index (CMI) 0.9558	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Licensed Fractical Hurses	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

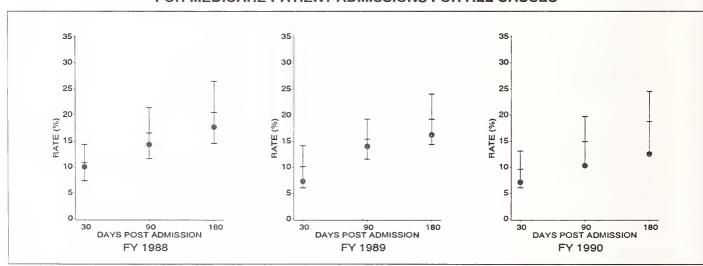
GREENWOOD COUNTY HOSPITAL

100 W 16 ST EUREKA, KS 67045 Medicare Provider Number: 170032

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	NUMBER OF CASES		30 DAYS		9	90 DAYS			180 DAYS		
CATEGORY		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	368	7.1	9.6	1.8	10.3	14,9	2.4	12.5	18.7	2.9	
CONDITIONS:											
Acute Myocardial Infarction	3	0.0	17.7		0.0	22.7		0.0	26.1		
Congestive Heart Failure	18	16.7	16.7		22.2	26.1		27.8	32.3		
Pneumonia/Influenza	54	7.4	15.5	7.4	13.0	21.2	8.2	14.8	25.1	8.9	
Chronic Obstructive Pulmonary Disease	2	0.0	4.5		0.0	9.0		0.0	13.5		
Transient Cerebral Ischemia	5	0.0	1.1		0.0	2.6		0.0	4.4		
Stroke	13	23.1	19.4		30.8	25.7		30.8	29.8		
Hip Fracture	0										
Sepsis	2	0.0	17.5	••••	0.0	25.5		0.0	30.3		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	0										
Open Reduction of Hip Fracture	0										
Prostatectomy	0										
Cholecystectomy	8	0.0	1.3		0.0	2.3		0.0	3.1		
Hysterectomy	1	0.0	0.2		0.0	0.5		0.0	1.0		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



GREENWOOD COUNTY HOSPITAL Medicare Provider Number: 170032

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	77.8 years	Cancer	6.5 %
Proportion female	60.3 %	Chronic cardiovascular disease	50.3 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.5 %
Referred by personal or HMO physician	35.3 %	Chronic renal disease	1.4 %
Transferred from skilled nursing facility	1.1 %	Chronic pulmonary disease	27.7 %
Admitted for elective procedure	5.7 %	Cerebrovascular degeneration	3.0 %
Admitted for emergency	2.2 %	Diabetes mellitus	9.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	76.5%	Hospital	6.1 Days
State	22.3%	State	7.3 Days
Outside State	1.2%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	0
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 37.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 4.3 %	Hospice Care No
Case Mix Index (CMI) 1.0450	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 4	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Licenseu r factical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

GRISELL MEMORIAL HOSPITAL
330 VERMONT, BOX 268
RANSOM, KS 67572
Medicare Provider Number: 170121

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	51	17.6	10.3	7.8	17.6	14.3	7.2	17.6	17.5	7.8
CONDITIONS:										
Acute Myocardial Infarction	2	100.0	29.5		100.0	32.6		100.0	36.6	
Congestive Heart Failure	1	100.0	17.6		100.0	28.2		100.0	34.8	
Pneumonia/Influenza	6	16.7	13.2		16.7	18.9		16.7	21.8	
Chronic Obstructive Pulmonary Disease	1	0.0	3.5		0.0	6.8		0.0	9.3	
Transient Cerebral Ischemia	0									
Stroke	0									
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

GRISELL MEMORIAL HOSPITAL Medicare Provider Number: 170121

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission 80).4 years	Cancer	2.0 %
Proportion female 64	1.7 %	Chronic cardiovascular disease	39.2 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician 49	9.0 %	Chronic renal disease	9.8 %
Transferred from skilled nursing facility 0	0.0 %	Chronic pulmonary disease	5.9 %
Admitted for elective procedure 72	2.5 %	Cerebrovascular degeneration	2.0 %
Admitted for emergency5	5.9 %	Diabetes mellitus	9.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

٧:	MEDICARE AVERAGE LENGTH OF STAY:	
89.1%	Hospital	4.1 Days
8.7%	State	7.3 Days
2.2%	National	8.6 Days
100.0%		
	89.1% 8.7% 2.2%	89.1% Hospital

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	989
PROFILE:	SPECIALTY SERVICES:
Total Beds 52	Burn Unit No
Occupancy Rate 65.0 %	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Geriatric No
Medicare Discharges 43.7 %	Hospice Care No
Case Mix Index (CMI) 0.8500	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/DrugNo
	Rehabilitation No
Licensed Practical Nurses 0	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

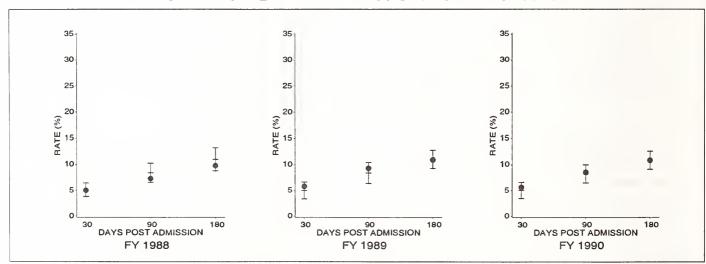
^{*} Not used in calculating mortality rates

HALSTEAD HOSPITAL
328 POPLAR ST
HALSTEAD, KS 67056
Medicare Provider Number: 170144

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		3	BO DAY	s	9	DAYS	<u> </u>	18	0 DAYS	>
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1242	5.6	5.0	0.8	8.5	8.2	0.9	10.8	10.8	0.9
CONDITIONS:										
Acute Myocardial Infarction	16	25.0	22.6		25.0	26.0		25.0	28.9	
Congestive Heart Failure	13	23.1	13.4		23.1	22.3		30.8	28.1	
Pneumonia/Influenza	28	7.1	14.9		14.3	20.8		28.6	24.7	
Chronic Obstructive Pulmonary Disease	11	18.2	5.7		18.2	10.4		18.2	14.1	
Transient Cerebral Ischemia	12	0.0	2.4		0.0	5.4		8.3	8.3	
Stroke	25	20.0	16.3		24.0	21.6		32.0	25.4	*****
Hip Fracture	13	7.7	7.2		7.7	12.8		7.7	16.8	
Sepsis	3	33.3	23.6		33.3	30.0		33.3	35.6	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	8	25.0	4.0		50.0	5.6		50.0	6.4	
Initial Pacemaker Insertion	12	8.3	1.8		8.3	3.7		8.3	5.7	
Carotid Endarterectomy	24	0.0	1.3		0.0	2.5		0.0	3.8	
Hip Replacement/Reconstruction	74	0.0	1.6	2.1	0.0	2.9	3.3	1.4	3.9	3.2
Open Reduction of Hip Fracture	2	50.0	6.7		50.0	11.8		50.0	15.8	
Prostatectomy	78	1.3	0.7	1.1	3.8	1.7	2.3	3.8	2.9	2.9
Cholecystectomy	27	0.0	1.4		3.7	2.7		3.7	3.7	
Hysterectomy	17	0.0	0.2		0.0	0.5		0.0	0.9	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HALSTEAD HOSPITAL Medicare Provider Number: 170144

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:			
Average age at admission	74.0 years	Cancer	9.3 %
Proportion female	50.0 %	Chronic cardiovascular disease	29.9 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.6 %
Referred by personal or HMO physician	76.2 %	Chronic renal disease	1.4 %
Transferred from skilled nursing facility	0.2 %	Chronic pulmonary disease	12.3 %
Admitted for elective procedure	53.5 %	Cerebrovascular degeneration	4.6 %
Admitted for emergency	14.3 %	Diabetes mellitus	4.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSIO	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	19.3%	Hospital	6.6 Days
State	75.9%	State	7.3 Days
Outside State	4.8%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	90
PROFILE: Total Beds	SPECIALTY SERVICES: Burn Unit
STAFFING: Total Number of Physicians	Organ/Tissue Transplant Yes Other Intensive Care No Trauma Center No OTHER SPECIALTY/HOSPITAL-BASED SERVICES: Alcohol/Drug No Rehabilitation No Psychlatric Yes Medicare Swing Beds Yes
** Except for CMI	Medicare Swing Deds Yes

^{*} Not used in calculating mortality rates

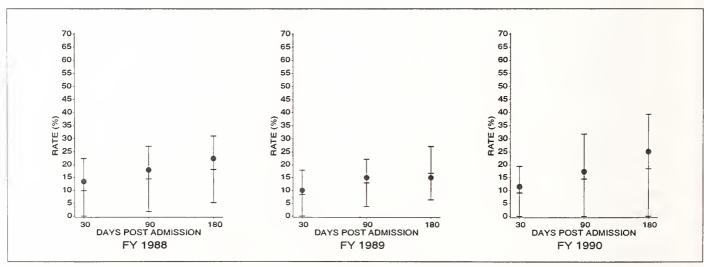
HAMILTON COUNTY HOSPITAL

EAST AVENUE G & HUSER ST, BOX 909 SYRACUSE, KS 67878 Medicare Provider Number: 170079

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
		30 DAYS		9	0 DAYS	3	18	180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	52	11.5	9.0	5.2	17.3	14.4	8.6	25.0	18.4	10.5
CONDITIONS:										
Acute Myocardial Infarction	1	0.0	33.4		0.0	35.5		0.0	38.2	
Congestive Heart Failure	2	0.0	16.2		0.0	25.6		0.0	32.2	
Pneumonia/Influenza	4	25.0	14.8		25.0	20.5	****	50.0	25.1	
Chronic Obstructive Pulmonary Disease	5	0.0	9.1		0.0	15.6		40.0	20.0	
Transient Cerebral Ischemia	0									
Stroke	1	100.0	24.3		100.0	32.5		100.0	37.5	
Hip Fracture	1	0.0	6.4		0.0	12.8	****	0.0	19.1	
Sepsis	1	100.0	27.1		100.0	37.3		100.0	42.7	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HAMILTON COUNTY HOSPITAL

Medicare Provider Number: 170079

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	79.1 years	Cancer	3.8 %
Proportion female	69.2 %	Chronic cardiovascular disease	44.2 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	38.5 %	Chronic renal disease	11.5 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	32.7 %
Admitted for elective procedure	21.2 %	Cerebrovascular degeneration	9.6 %
Admitted for emergency	32.7 %	Diabetes mellitus	1.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSIO	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	69.7%	Hospital	6.3 Days
State	18.2%	State	7.3 Days
Outside State	12.1%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	0
PROFILE:	SPECIALTY SERVICES:
Total Beds 56	Burn Unit No
Occupancy Rate 53.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 34.4 %	Hospice Care No
Case Mix Index (CMI) 0.9589	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians (Not Available)	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
Medical Residents/Interns(Not Available)	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses(Not Available)	Alcohol/DrugNo
	Rehabilitation No
Licensed Practical Nurses (Not Available)	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

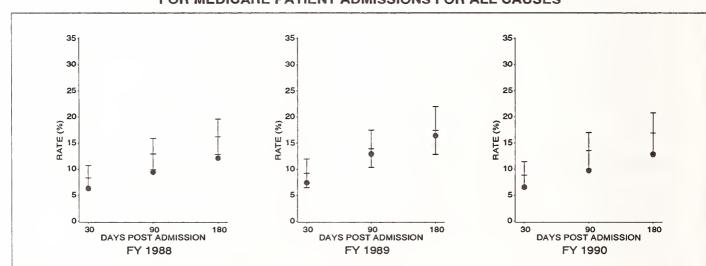
HAYS MEDICAL CENTER

2220 CANTERBURY ROAD HAYS, KS 67601 Medicare Provider Number: 170013

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)										
		3	0 DAY	S	9	0 DAYS	3	18	180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	719	6.5	8.8	1.3	9.7	13.5	1.8	12.8	16.9	1.9	
CONDITIONS:											
Acute Myocardial Infarction	18	33.3	27.0		38.9	31.3		38.9	34.4		
Congestive Heart Failure	38	18.4	18.6		23.7	29.0		36.8	35.8		
Pneumonia/Influenza	56	12.5	16.8	7.2	14.3	22.9	9.6	14.3	26.8	11.2	
Chronic Obstructive Pulmonary Disease	12	0.0	6.5		0.0	11.4		0.0	15.1		
Transient Cerebral Ischemia	5	0.0	1.7		0.0	4.0		0.0	6.9		
Stroke	26	15.4	19.8		15.4	25.4		23.1	28.6		
Hip Fracture	42	9.5	6.6	••••	9.5	11.4		16.7	14.9		
Sepsis	5	0.0	17.3		20.0	24.6		20.0	28.3	•	
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	8	0.0	5.2		0.0	10.5		0.0	14.6		
Carotid Endarterectomy	3	0.0	1.3	••••	0.0	2.4		0.0	3.5		
Hip Replacement/Reconstruction	22	9.1	3.9		9.1	6.9		9.1	9.1		
Open Reduction of Hip Fracture	8	0.0	6.0		0.0	10.4		0.0	13.5		
Prostatectomy	52	0.0	1.0	1.6	0.0	2.4	2.9	0.0	4.2	4.4	
Cholecystectomy	11	0.0	3.7		0.0	7.0		0.0	9.4		
Hysterectomy	5	0.0	0.1	****	0.0	0.1		0.0	0.3		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HAYS MEDICAL CENTER Medicare Provider Number: 170013

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	76.1 years	Cancer	7.1 %
Proportion female	52.4 %	Chronic cardiovascular disease	48.8 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.1 %
Referred by personal or HMO physician	44.4 %	Chronic renal disease	1.3 %
Transferred from skilled nursing facility	1.1 %	Chronic pulmonary disease	17.2 %
Admitted for elective procedure	25.0 %	Cerebrovascular degeneration	3.3 %
Admitted for emergency	0.4 %	Diabetes mellitus	2.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	39.3%	Hospital	6.5 Days
State	58.7%	State	7.3 Days
Outside State	2.0%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	90
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 46.0 %	Cardiac Intensive Care No
Ownership/Control Church	Comprehensive Geriatric No
Medicare Discharges 50.8 %	Hospice Care No
Case Mix Index (CMI) 1.2629	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns 0	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses 93	Alcohol/DrugNo
Licensed Practical Nurses	RehabilitationYes
Licensed Fractical Nuises	Psychlatric Yes
** Except for CMI	Medicare Swing Beds Yes

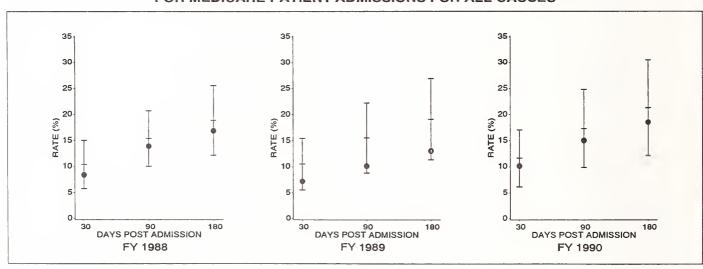
^{*} Not used in calculating mortality rates

HERINGTON MUNICIPAL HOSPITAL 100 E HELEN ST HERINGTON, KS 67449 Medicare Provider Number: 170115

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
		- 3	0 DAY	S	9	0 DAYS	<u> </u>	18	0 DAYS	•
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	227	10.1	11.6	2.7	15.0	17.3	3.7	18.5	21.3	4.6
CONDITIONS:										
Acute Myocardial Infarction	6	33.3	27.8		33.3	31.5		33.3	35.1	
Congestive Heart Failure	13	53.8	22.6		61.5	33.9		61.5	41.1	
Pneumonia/Influenza	27	14.8	18.4		25.9	25.3		29.6	29.6	
Chronic Obstructive Pulmonary Disease	1	0.0	9.9		0.0	14.3		0.0	18.6	
Transient Cerebral Ischemia	2	0.0	1.8		0.0	3.8		0.0	5.9	
Stroke	6	0.0	18.9		0.0	22.9		16.7	26.2	
Hip Fracture	3	0.0	3.6		0.0	7.3		0.0	10.1	
Sepsis	2	0.0	41.8		50.0	50.4		50.0	55.9	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	3	0.0	2.3		0.0	5.0		0.0	7.7	
Hysterectomy	3	0.0	0.3		0.0	0.7		0.0	1.2	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HERINGTON MUNICIPAL HOSPITAL Medicare Provider Number: 170115

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	78.8 years	Cancer	6.1 %
Proportion female	53.1 %	Chronic cardiovascular disease	45.2 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.9 %
Referred by personal or HMO physiclan	25.4 %	Chronic renal disease	5.3 %
Transferred from skilled nursing facility	0.9 %	Chronic pulmonary disease	15.8 %
Admitted for elective procedure	4.4 %	Cerebrovascular degeneration	7.5 %
Admitted for emergency	0.4 %	Diabetes mellitus	3.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	74.5%	Hospital	7.1 Days
State	22.7%	State	7.3 Days
Outside State	2.8%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	90
PROFILE:	SPECIALTY SERVICES:
Total Beds 32	Burn Unit No
Occupancy Rate 31.0 %	Cardiac Intensive Care Yes
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 70.5 %	Hospice Care No
Case Mix Index (CMI) 1.1185	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Licensed Fractical Nuises	Psychlatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

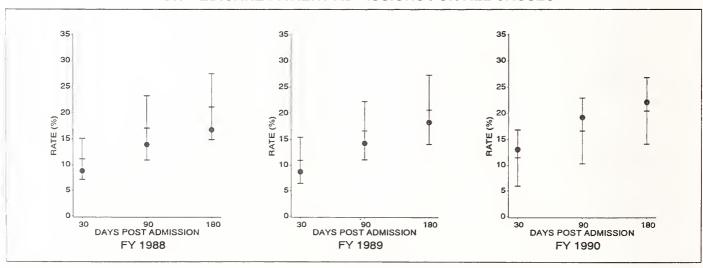
HIAWATHA COMMUNITY HOSPITAL

300 UTAH ST HIAWATHA, KS 66434 Medicare Provider Number: 170004

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		30 DAYS		9	0 DAYS	3	18	180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	339	13.0	11.4	2.7	19.2	16.6	3.2	22.1	20.4	3.2
CONDITIONS:										
Acute Myocardial Infarction	8	37.5	32.1		37.5	35.1		37.5	38.4	
Congestive Heart Failure	14	28.6	15.1		35.7	22.8		42.9	29.8	
Pneumonia/Influenza	32	18.8	18.1		21.9	24.6		28.1	28.7	
Chronic Obstructive Pulmonary Disease	6	16.7	6.7		16.7	12.6		16.7	17.4	
Transient Cerebral Ischemia	4	0.0	2.3		0.0	4.6		0.0	6.8	
Stroke	16	25.0	29.2		37.5	36.9		43.8	40.9	
Hip Fracture	2	50.0	18.4		50.0	31.8		50.0	38.1	
Sepsis	3	33.3	31.5		66.7	42.6		66.7	47.9	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	3	0.0	2.0		0.0	3.4		0.0	4.6	
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	15	0.0	1.3		6.7	3.1		13.3	5.3	
Cholecystectomy	5	20.0	0.7		20.0	1.2		20.0	1.7	
Hysterectomy	3	0.0	0.2		0.0	0.5		0.0	8.0	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HIAWATHA COMMUNITY HOSPITAL Medicare Provider Number: 170004

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	. 80.0 years	Cancer	6.5 %
Proportion female	. 62.2 %	Chronic cardiovascular disease	51.3 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	. 31.3 %	Chronic renal disease	2.9 %
Transferred from skilled nursing facility	. 1.5 %	Chronic pulmonary disease	18.0 %
Admitted for elective procedure	. 11.8 %	Cerebrovascular degeneration	3.2 %
Admitted for emergency	. 0.6 %	Diabetes mellitus	10.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	75.3%	Hospital	6.7 Days
State	21.6%	State	7.3 Days
Outside State	3.1%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds45	Burn Unit No
Occupancy Rate 44.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 44.7 %	Hospice Care No
Case Mix Index (CMI) 1.1328	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 6	Other Intensive Care No
Percent of Physicians Board Certified Specialists100.0 %	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/DrugNo
Licensed Practical Nurses 9	RehabilitationNo
Licensed Fractical Nuises	Psychlatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

HODGEMAN COUNTY HEALTH CENTER 809 W BRAMLEY JETMORE, KS 67854 Medicare Provider Number: 170090

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	ORTALIT	Y RATE	S (%)			
			30 DAY	s	9	0 DAYS	3	18	0 DAYS	5
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	71	4.2	11.3	5.2	12.7	17.3	5.0	21.1	21.5	6.4
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	2	0.0	11.1		0.0	17.2		0.0	23.0	
Pneumonia/Influenza	13	0.0	17.4		23.1	23.7		38.5	28.1	
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	0									
Stroke	1	0.0	10.0		0.0	13.3		0.0	15.5	
Hip Fracture	0									
Sepsis	3	0.0	21.6		0.0	27.7		0.0	31.9	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	1	0.0	0.6		0.0	1.6		0.0	2.9	
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

HODGEMAN COUNTY HEALTH CENTER Medicare Provider Number: 170090

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 80.7 years	ars Cancer 4.2 %
Proportion female	Chronic cardiovascular disease 60.6 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.0 %
Referred by personal or HMO physician 36.6 %	Chronic renal disease 2.8 %
Transferred from skilled nursing facility 1.4 %	Chronic pulmonary disease 18.3 %
Admitted for elective procedure 88.7 %	Cerebrovascular degeneration 2.8 %
Admitted for emergency 0.0 %	Diabetes mellitus 7.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	66.6%	Hospital	3.5 Days
State	29.8%	State	7.3 Days
Outside State	3.6%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds 54	Burn Unit No
Occupancy Rate 75.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 45.0 %	Hospice Care No
Case Mix Index (CMI) 0.9901	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 1	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Licensed Fractical Naises	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

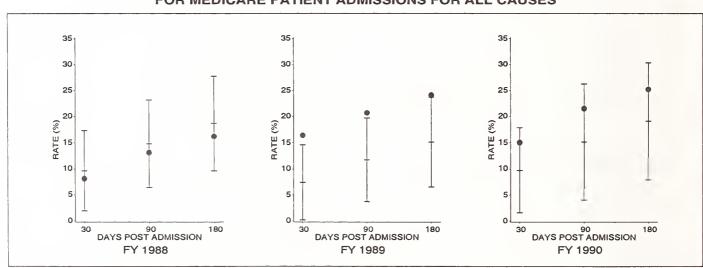
HOLTON CITY HOSPITAL

510 KANSAS AVE HOLTON, KS 66436 Medicare Provider Number: 170160

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				M	ORTALITY	/ RATE	S (%)			
			BO DAY	s	9(DAYS	3	18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	107	15.0	9.7	4.1	21.5	15.1	5.6	25.2	19.1	5.6
CONDITIONS:										
Acute Myocardial Infarction	2	100.0	25.8		100.0	28.7		100.0	32.4	
Congestive Heart Failure	6	16.7	12.1		33.3	18 .6		33.3	24.3	
Pneumonia/Influenza	8	25.0	12.4		25.0	17.8		25.0	21.9	
Chronic Obstructive Pulmonary Disease	2	0.0	5.2		50.0	11.4		50.0	17.4	
Transient Cerebral Ischemia	5	0.0	0.8		0.0	2.1		0.0	3.7	
Stroke	3	0.0	17.8		33.3	25.0		33.3	29.1	
Hip Fracture	0									
Sepsis	1	100.0	42.3		100.0	55.0		100.0	61.2	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	1	0.0	0.5		0.0	1.2		0.0	2.1	
Cholecystectomy	3	0.0	1.4		0.0	3.2		0.0	5.3	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HOLTON CITY HOSPITAL Medicare Provider Number: 170160

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:
Average age at admission 79.2 years	Cancer 10.3 %
Proportion female 54.2 %	Chronic cardiovascular disease 30.8 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.0 %
Referred by personal or HMO physician 51.4 %	Chronic renal disease 0.9 %
Transferred from skilled nursing facility 1.9 %	Chronic pulmonary disease 10.3 %
Admitted for elective procedure 96.3 %	Cerebrovascular degeneration 3.7 %
Admitted for emergency 0.0 %	Diabetes mellitus 5.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	77.0%	Hospital	4.9 Days
State	23.0%	State	7.3 Days
Outside State	0.0%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	0
PROFILE:	SPECIALTY SERVICES:
Total Beds 15	Burn Unit No
Occupancy Rate 46.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 40.3 %	Hospice CareYes
Case Mix Index (CMI) 0.9652	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 3	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/DrugNo
Registered Nurses 8 Licensed Practical Nurses	RehabilitationNo
Licenseu Fractical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

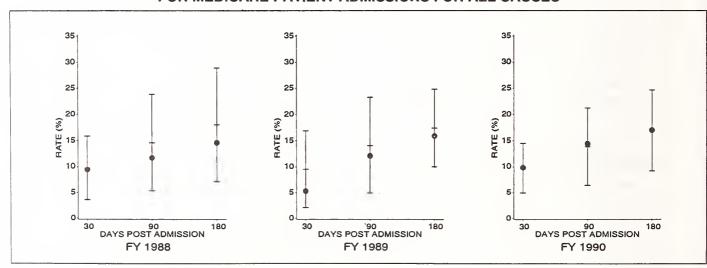
HORTON COMMUNITY HOSPITAL

240 W 18TH ST HORTON, KS 66439 Medicare Provider Number: 170067

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	DRTALIT	Y RATE	S (%)			
			0 DAY	S	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	овѕ	PRED	SD*
ALL CAUSES	153	9.8	9.7	2.4	14.4	13.8	3.7	17.0	16.9	3.9
CONDITIONS:										
Acute Myocardial Infarction	2	0.0	31.6		0.0	35.1		0.0	39.0	
Congestive Heart Failure	6	50.0	16.6		50.0	22.7		50.0	27.7	
Pneumonia/Influenza	24	12.5	18.0		16.7	24.3		20.8	28.4	
Chronic Obstructive Pulmonary Disease	7	0.0	4.1		0.0	7.6		0.0	10.1	
Transient Cerebral Ischemia	2	0.0	1.0		0.0	2.4		0.0	4.1	
Stroke	3	33.3	16.6		66.7	21.8		66.7	25.6	
Hip Fracture	0									
Sepsis	1	0.0	38.7		100.0	42.4		100.0	44.6	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	11	0.0	0.6		0.0	1.2		0.0	2.1	
Cholecystectomy	3	0.0	0.6		0.0	1.3		0.0	1.7	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HORTON COMMUNITY HOSPITAL Medicare Provider Number: 170067

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	77.3 vears	Cancer	2.0 %
	•		
Proportion female	54.9 %	Chronic cardiovascular disease	45.1 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	17.6 %	Chronic renal disease	2.0 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	16.3 %
Admitted for elective procedure	10.5 %	Cerebrovascular degeneration	6.5 %
Admitted for emergency	0.7 %	Diabetes mellitus	7.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	78.2%	Hospital	4.9 Days
State	18.2%	State	7.3 Days
Outside State	3.6%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	90
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 51.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 47.7 %	Hospice Care No
Case Mix Index (CMI) 0.9705	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists100.0 %	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug No
Registered Nurses	Rehabilitation No
Licensed Fractical Nurses5	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

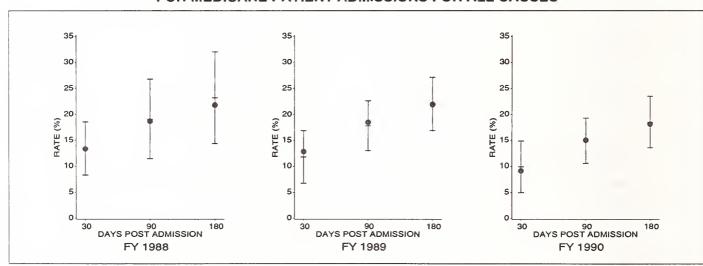
HOSPITAL DISTRICT 1 CRAWFORD COUNTY

RR 2, BOX 5A GIRARD, KS 66743 Medicare Provider Number: 170098

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
		- 3	30 DAY	s		9	0 DAYS	3	1	80 DAY	S
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	0	BS	PRED	SD*	ОВ	S PRE	SD*
ALL CAUSES	287	9.1	9.9	2.5	1	5.0	14.9	2.2	18.	1 18.5	2.5
CONDITIONS:											
Acute Myocardial Infarction	4	25.0	42.8		5	0.0	47.9		50.	0 50.7	
Congestive Heart Failure	26	7.7	15.9		3	8.0	25.2		34.	6 31.5	
Pneumonia/Influenza	23	21.7	16.3		3	4.8	22.4		34.	8 26.5	
Chronic Obstructive Pulmonary Disease	7	0.0	5.7		1	4.3	10.3		28.	6 13.9	
Transient Cerebral Ischemia	8	0.0	1.1		1	2.5	2.5		12.	5 4.1	
Stroke	15	26.7	22.8		2	6.7	29.3		33.	3 33.3	
Hip Fracture	0										
Sepsis	2	50.0	14.3		5	0.0	22.3		50.	0 27.4	
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	0										
Open Reduction of Hip Fracture	0										
Prostatectomy	12	0.0	0.7			0.0	1.7		0.	0 3.1	
Cholecystectomy	1	0.0	13.7			0.0	26.3		0.	0 33.3	••••
Hysterectomy	5	20.0	1.7	••••	2	0.0	3.6		20.	0 5.5	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HOSPITAL DISTRICT 1 CRAWFORD COUNTY

Medicare Provider Number: 170098

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	77.6 years	Cancer	3.8 %
Proportion female	59.6 %	Chronic cardiovascular disease	34.5 %
DMISSION SOURCES/TYPES:		Chronic liver disease	0.3 %
Referred by personal or HMO physician	49.8 %	Chronic renal disease	1.4 %
Transferred from skilled nursing facility	0.3 %	Chronic pulmonary disease	17.8 %
Admitted for elective procedure	5.6 %	Cerebrovascular degeneration	3.1 %
Admitted for emergency	42.5 %	Diabetes mellitus	3.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	90.6%	Hospital	4.7 Days
State	5.1%	State	7.3 Days
Outside State	4.3%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 56.0 %	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Geriatric No
Medicare Discharges 59.3 %	Hospice Care No
Case Mix Index (CMI) 0.9994	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug No
Registered Nurses	Rehabilitation No
Licensed Fractical Nurses	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

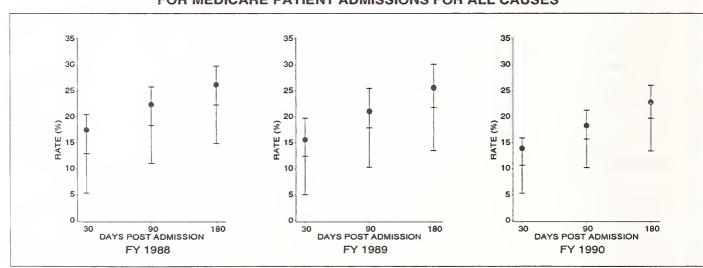
HOSPITAL DISTRICT 1 RICE COUNTY

619 S CLARK ST LYONS, KS 67554 Medicare Provider Number: 170051

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		3	0 DAY	s	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD°	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	202	13.9	10.6	2.7	18.3	15.7	2.8	22.8	19.7	3.2
CONDITIONS:										
Acute Myocardial Infarction	22	27.3	21.8	••••	27.3	25.0		36.4	28.1	
Congestive Heart Failure	13	7.7	11.3		15.4	18.5		23.1	24.3	
Pneumonia/Influenza	16	18.8	15.3		25.0	22.0		25.0	26.5	
Chronic Obstructive Pulmonary Disease	1	0.0	12.2		0.0	19.8		0.0	27.9	
Transient Cerebral Ischemla	6	0.0	1.5		0.0	3.8		0.0	6.7	
Stroke	6	33.3	16.2	••••	33.3	23.9		50.0	28.5	
Hip Fracture	1	0.0	3.5		0.0	6.3		0.0	9.2	
Sepsis	3	33.3	21.0		33.3	27.6		33.3	32.4	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	1	0.0	2.1		0.0	3.1		0.0	3.9	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HOSPITAL DISTRICT 1 RICE COUNTY Medicare Provider Number: 170051

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	78.7 years	Cancer	5.4 %
Proportion female	64.4 %	Chronic cardiovascular disease	50.0 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.5 %
Referred by personal or HMO physician	96.0 %	Chronic renal disease	2.5 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	16.3 %
Admitted for elective procedure	0.0 %	Cerebrovascular degeneration	3.0 %
Admitted for emergency	0.0 %	Diabetes mellitus	10.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

MEDICARE AVERAGE LENGTH OF STAY:	
.9% Hospital	4.5 Days
.5% State	7.3 Days
.6% National	8.6 Days
.0%	
	.9% Hospital

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Geriatric No
Medicare Discharges 43.9 %	Hospice Care No
Case Mix Index (CMI) 0.9930	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians5	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/DrugNo
Registered Nurses	RehabilitationNo
Licensed Fractical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

HOSPITAL DISTRICT 1-ATTICA
302 N BOTKIN, BOX 268
ATTICA, KS 67009
Medicare Provider Number: 170170

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	27	29.6	15.2		40.7	21.7		44.4	25.7	
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	1	0.0	14.0		0.0	24.0		0.0	29.1	
Pneumonia/Influenza	2	50.0	23.5		100.0	31.5		100.0	36.0	
Chronic Obstructive Pulmonary Disease	2	0.0	8.6		0.0	16.2		0.0	21.7	
Transient Cerebral Ischemia	0									
Stroke	4	50.0	37.4		75.0	49.6		75.0	55.3	
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

HOSPITAL DISTRICT 1-ATTICA Medicare Provider Number: 170170

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	81.0 years	Cancer	3.7 %
Proportion female	55.6 %	Chronic cardiovascular disease	51.9 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	37.0 %	Chronic renal disease	3.7 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	18.5 %
Admitted for elective procedure	0.0 %	Cerebrovascular degeneration	7.4 %
Admitted for emergency	18.5 %	Diabetes mellitus	7.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	70.2%	Hospital	4.6 Days
State	22.8%	State	7.3 Days
Outside State	7.0%	National	8.6 Days
Total	100.0%		

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Ownership/Control District/Authority	Coronary Care Unit Yes
Case Mix Index (CMI) 1.0033	Hospice Care No
STAFFING:	Intensive Care Unit No
Medical Residents/Interns 0	Organ Transplant No
Registered Nurses 5	Trauma Center No
Licensed Practical Nurses	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug No
	Rehabilitation No
	Psychiatric No
	Medicare Swing Beds Yes
** Except for CMI	

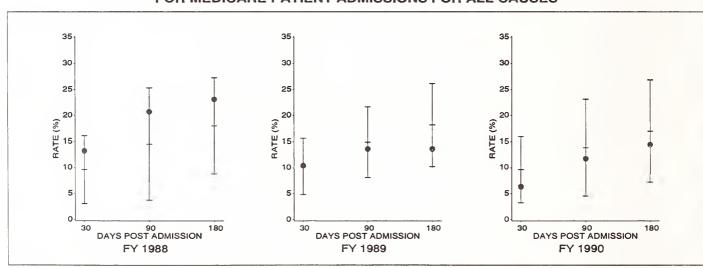
^{*} Not used in calculating mortality rates

HOSPITAL DISTRICT 1-SUMNER COUNTY 601 SOUTH OSAGE CALDWELL, KS 67022 Medicare Provider Number: 170152

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
	30 DAYS		9	0 DAYS	3	18	180 DAYS			
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	111	6.3	9.6	3.2	11.7	13.8	4.7	14.4	17.0	4.9
CONDITIONS:										
Acute Myocardial Infarction	3	66.7	27.7		66.7	30.8		66.7	34.3	
Congestive Heart Failure	9	22.2	13.9		22.2	22.0		22.2	28.1	
Pneumonia/Influenza	13	0.0	8.6		7.7	11.9		7.7	14.3	
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	1	0.0	1.5		0.0	3.2		0.0	5.3	
Stroke	3	0.0	28.8		0.0	32.2		0.0	34.4	
Hip Fracture	0									
Sepsis	2	0.0	29.1		0.0	34.7		0.0	37.7	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	1	0.0	0.4	••••	0.0	0.8		0.0	1.0	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HOSPITAL DISTRICT 1-SUMNER COUNTY Medicare Provider Number: 170152

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	76.7 years	Cancer	4.5 %
Proportion female	55.0 %	Chronic cardiovascular disease	47.7 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	48.6 %	Chronic renal disease	0.9 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	6.3 %
Admitted for elective procedure	0.0 %	Cerebrovascular degeneration	2.7 %
Admitted for emergency	0.0 %	Diabetes mellitus	11.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSIO	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	79.1%	Hospital	5.9 Days
State	5.8%	State	7.3 Days
Outside State	15.1%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 18.0 %	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Geriatric No
Medicare Discharges 74.0 %	Hospice Care No
Case Mix Index (CMI) 1.0145	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 13	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns 0	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/DrugNo
Licensed Practical Nurses	Rehabilitation No
LICENSES I TACIONI INVISES	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

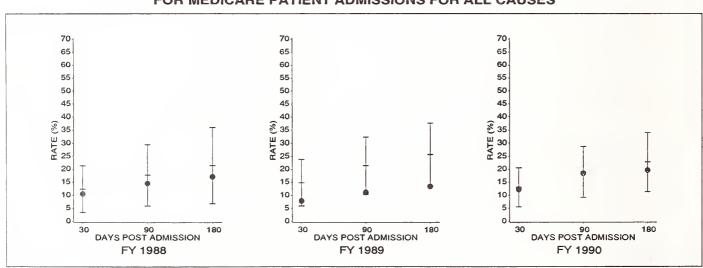
^{*} Not used in calculating mortality rates

HOSPITAL DISTRICT 1-WASHINGTON COUNTY 205 SOUTH HANOVER HANOVER, KS 66945 Medicare Provider Number: 170099

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
			30 DAY	s	9	0 DAYS	3	18	0 DAYS	,
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	овѕ	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	82	12.2	13.0	3.8	18.3	18.8	4.9	19.5	22.6	5.7
CONDITIONS:										
Acute Myocardial Infarction	3	66.7	41.7		66.7	45.4		66.7	48.4	
Congestive Heart Failure	1	0.0	46.2		0.0	65.2		0.0	74.8	
Pneumonia/Influenza	13	7.7	17.3		15.4	25.3		15.4	29.8	
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	0									
Stroke	4	25.0	17.3		25.0	21.9		25.0	25.3	
Hip Fracture	2	0.0	6.8		0.0	11.4		0.0	15.0	
Sepsis	1	0.0	8.1		0.0	11.6		0.0	15.7	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	1	0.0	2.3		0.0	3.9		0.0	5.7	
Prostatectomy	0									
Cholecystectomy	1	0.0	1.6		0.0	3.0		0.0	3.7	
Hysterectomy	1	0.0	0.3		0.0	0.9		0.0	1.7	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HOSPITAL DISTRICT 1-WASHINGTON COUNTY Medicare Provider Number: 170099

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	77.6 years	Cancer	4.9 %
Proportion female	52.4 %	Chronic cardiovascular disease	29.3 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	86.6 %	Chronic renal disease	8.5 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	7.3 %
Admitted for elective procedure	0.0 %	Cerebrovascular degeneration	1.2 %
Admitted for emergency	85.4 %	Diabetes mellitus	2.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	1 :	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	79.4%	Hospital	6.6 Days
State	14.3%	State	7.3 Days
Outside State	6.3%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 66.0 %	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Geriatric No
Medicare Discharges 58.8 %	Hospice Care No
Case Mix Index (CMI) 1.2287	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 20	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/DrugNo
Licensed Practical Nurses	Rehabilitation No
Listrica Facilitatives	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

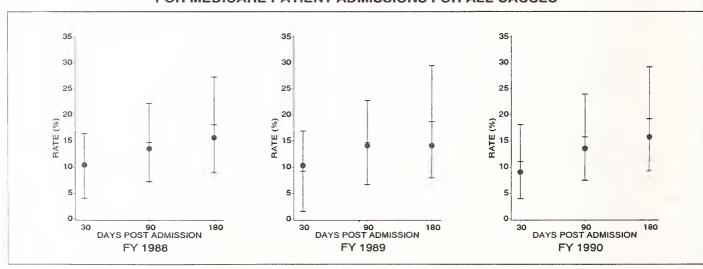
HOSPITAL DISTRICT 2-NESS COUNTY

312 E CUSTER ST NESS CITY, KS 67560 Medicare Provider Number: 170066

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)										
			30 DAY	s	9	90 DAYS			180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD°	OBS	PRED	SD°	OBS	PRED	SD*	
ALL CAUSES	89	9.0	11.0	3.5	13.5	15.7	4.1	15.7	19.2	5.0	
CONDITIONS:											
Acute Myocardial Infarction	5	0.0	29.7		20.0	33.8		20.0	36.8		
Congestive Heart Failure	5	20.0	17.8		40.0	25.9		40.0	31.4		
Pneumonia/Influenza	4	25.0	20.1		25.0	26.1		25.0	30.8		
Chronic Obstructive Pulmonary Disease	0										
Transient Cerebral Ischemia	7	0.0	1.8		0.0	3.9		0.0	6.1		
Stroke	5	40.0	19.1		40.0	24.5		40.0	28.4		
Hip Fracture	0										
Sepsis	2	0.0	20.3		0.0	24.1		0.0	27.9		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	0										
Open Reduction of Hip Fracture	0										
Prostatectomy	0										
Cholecystectomy	0										
Hysterectomy	0										

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HOSPITAL DISTRICT 2-NESS COUNTY Medicare Provider Number: 170066

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	78.2 vears	Cancer	6.7 %
Proportion female	-	Chronic cardiovascular disease	• • • • • • • • • • • • • • • • • • • •
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	48.3 %	Chronic renal disease	2.2 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	21.3 %
Admitted for elective procedure	16.9 %	Cerebrovascular degeneration	1.1 %
Admitted for emergency	9.0 %	Diabetes mellitus	7.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSIO	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	84.2%	Hospital	3.9 Days
State	15.1%	State	7.3 Days
Outside State	0.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds 52	Burn Unit No
Occupancy Rate 55.0 %	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Geriatric No
Medicare Discharges 44.1 %	Hospice Care No
Case Mix Index (CMI) 0.9789	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 19	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Licensed Fractical Nations	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

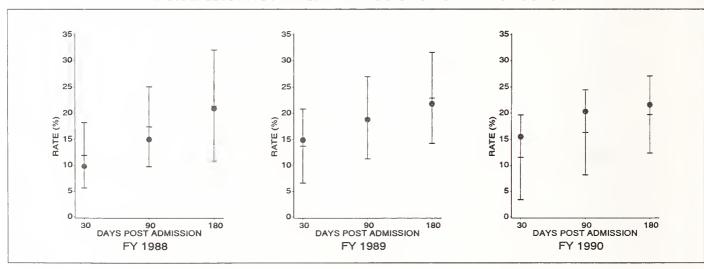
^{*} Not used in calculating mortality rates

HOSPITAL DISTRICT 5-HARPER COUNTY TWELFTH AND MAPLE HARPER, KS 67058 Medicare Provider Number: 170151

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		3	BO DAY	s	9	0 DAYS	;	18	0 DAYS	5
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	148	15.5	11.5	4.1	20.3	16.3	4.1	21.6	19.7	3.7
CONDITIONS:										
Acute Myocardial Infarction	11	45.5	37.4		45.5	40.8		45.5	45.0	
Congestive Heart Failure	4	0.0	13.5		0.0	22.6		0.0	28.5	
Pneumonia/Influenza	19	21.1	20.9		26.3	28.7		26.3	32.8	
Chronic Obstructive Pulmonary Disease	1	0.0	8.2		0.0	13.1		0.0	17.4	
Transient Cerebral Ischemia	1	0.0	1.1		0.0	2.6		0.0	4.6	
Stroke	4	50.0	17.6		50.0	25.1		50.0	30.6	
Hip Fracture	0									
Sepsis	2	0.0	29.9		0.0	36.5		0.0	40.7	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	3	0.0	0.6		0.0	1.3		0.0	2.2	
Cholecystectomy	0									
Hysterectomy	3	0.0	0.1		0.0	0.3		0.0	0.6	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HOSPITAL DISTRICT 5-HARPER COUNTY

Medicare Provider Number: 170151

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:
Average age at admission 78.0 year	s Cancer 2.0 %
Proportion female	Chronic cardiovascular disease 27.7 %
DMISSION SOURCES/TYPES:	Chronic liver disease 0.0 %
Referred by personal or HMO physician 33.8 %	Chronic renal disease 0.0 %
Transferred from skilled nursing facility 0.7 %	Chronic pulmonary disease 14.9 %
Admitted for elective procedure 8.8 %	Cerebrovascular degeneration 4.7 %
Admitted for emergency 63.5 %	Diabetes mellitus 3.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	M.	MEDICARE AVERAGE LENGTH OF STAY:	
OHIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	69.0%	Hospital	6.4 Days
State	27.8%	State	7.3 Days
Outside State	3.2%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 72.0 %	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Geriatric Yes
Medicare Discharges 58.3 %	Hospice Care No
Case Mix Index (CMI) 1.0339	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians2	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug No
Registered Nurses	Rehabilitation No
Licensed Fractical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

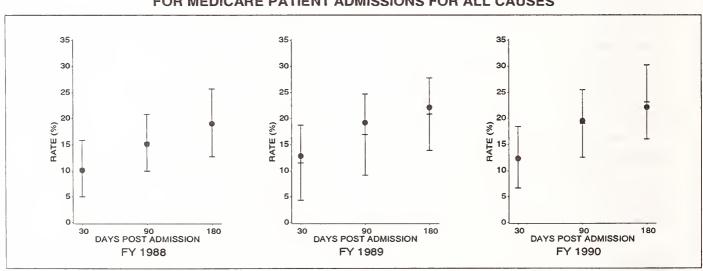
HOSPITAL DISTRICT 6-HARPER COUNTY

1101 E SPRING ST ANTHONY, KS 67003 Medicare Provider Number: 170124

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				M	ORTALIT	Y RATE	S (%)			
		3	O DAY	s	9	0 DAYS		18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	овѕ	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	154	12.3	12.5	3.0	19.5	19.0	3.2	22.1	23.1	3.6
CONDITIONS:										
Acute Myocardial Infarction	5	40.0	22.4		40.0	25.9		40.0	28.8	
Congestive Heart Failure	1	0.0	8.9		100.0	13.8		100.0	20.0	
Pneumonia/Influenza	4	25.0	12.8		25.0	18.9		25.0	22.8	
Chronic Obstructive Pulmonary Disease	5	0.0	13.4		20.0	25.1		20.0	33.0	
Transient Cerebral Ischemia	7	14.3	5.3		14.3	11.7		42.9	17.8	
Stroke	5	0.0	18.7		20.0	26.8		20.0	31.6	
Hip Fracture	1	0.0	7.5		0.0	13.8		0.0	17.8	
Sepsis	1	0.0	14.2		0.0	17.2		0.0	21.3	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	1	0.0	1.7		0.0	3.9		0.0	5.9	
Cholecystectomy	2	0.0	1.0		0.0	1.9		0.0	2.7	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HOSPITAL DISTRICT 6-HARPER COUNTY

Medicare Provider Number: 170124

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

EMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	78.5 years	Cancer	11.7 %
Proportion female	61.7 %	Chronic cardiovascular disease	28.6 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	39.6 %	Chronic renal disease	0.0 %
Transferred from skilled nursing facility	1.9 %	Chronic pulmonary disease	10.4 %
Admitted for elective procedure	9.1 %	Cerebrovascular degeneration	5.8 %
Admitted for emergency	9.1 %	Diabetes mellitus	7.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	84.9%	Hospital	5.8 Days
State	9.8%	State	7.3 Days
Outside State	5.3%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE: Total Beds	SPECIALTY SERVICES: Burn Unit
Percent of Physicians Board Certified Specialists	Trauma Center

^{*} Not used in calculating mortality rates

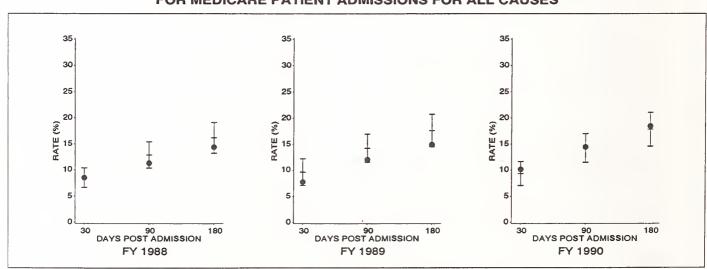
HUMANA HOSPITAL DODGE CITY

3001 AVE A BOX 1478 DODGE CITY, KS 67801 Medicare Provider Number: 170175

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	s
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	956	10.1	9.3	1.2	14.4	14.2	1.4	18.4	17.8	1.6
CONDITIONS:										
Acute Myocardial Infarction	20	30.0	22.8	••••	35.0	26.2		35.0	29.0	****
Congestive Heart Fallure	30	10.0	12.4		16.7	19.8		30.0	25.9	
Pneumonla/Influenza	50	14.0	15.2		18.0	20.9		22.0	25.0	
Chronic Obstructive Pulmonary Disease	8	0.0	15.4		12.5	25.5		12.5	31.8	
Translent Cerebral Ischemia	10	10.0	1.7	••••	10.0	3.9		10.0	6.2	
Stroke	34	17.6	19.7		20.6	26.6		29.4	30.5	
Hip Fracture	60	10.0	6.3	4.4	13.3	11.6	4.4	16.7	15.5	4.8
Sepsis	7	14.3	21.9		14.3	29.7		28.6	34.8	
PROCEDURES:										
Angloplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	9	11.1	3.0	*****	11.1	6.0		22.2	8.8	
Carotid Endarterectomy	1	0.0	1.3		0.0	2.5		0.0	3.8	
Hip Replacement/Reconstruction	45	4.4	2.9		8.9	5.6		11.1	7.9	
Open Reduction of Hip Fracture	8	12.5	5.8	*****	12.5	11.6		12.5	16.1	
Prostatectomy	31	0.0	1.0		0.0	2.4		0.0	4.2	
Cholecystectomy	10	0.0	2.4		0.0	4.4		0.0	5.9	
Hysterectomy	5	0.0	2.0		0.0	4.5		0.0	6.9	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HUMANA HOSPITAL DODGE CITY Medicare Provider Number: 170175

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	76.3 years	Cancer	8.2 %
Proportion female	54.4 %	Chronic cardiovascular disease	40.1 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.5 %
Referred by personal or HMO physician	64.6 %	Chronic renal disease	2.2 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	17.3 %
Admitted for elective procedure	3.2 %	Cerebrovascular degeneration	4.0 %
Admitted for emergency	25.3 %	Diabetes mellitus	8.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	64.4%	Hospital	6.5 Days
State	33.4%	State	7.3 Days
Outside State	2.2%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990)
PROFILE:	SPECIALTY SERVICES:
Total Beds 110	Burn Unit No
Occupancy Rate 44.0 %	Cardiac Intensive Care No
Ownership/Control Private, For Profit	Comprehensive Geriatric No
Medicare Discharges	Hospice Care No
Case Mix Index (CMI) 1.2609	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center Yes
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Licensed Flactical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds No

^{*} Not used in calculating mortality rates

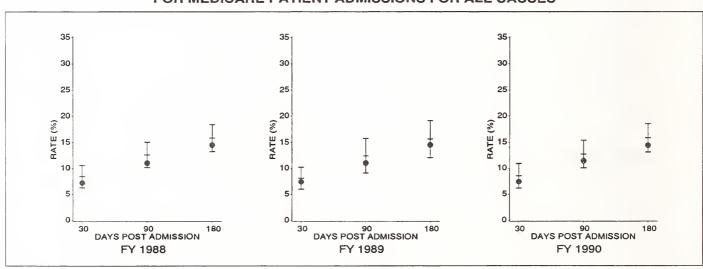
HUMANA HOSPITAL OVERLAND PARK

10500 QUIVIRA RD OVERLAND PARK, KS 66215 Medicare Provider Number: 170176

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
		;	30 DAY	S	9	90 DAYS			180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD°	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	1303	7.4	8.5	1.2	11.4	12.7	1.3	14.4	15.8	1.4	
CONDITIONS:											
Acute Myocardial Infarction	39	20.5	31.9		30.8	35.5		33.3	38.5		
Congestive Heart Failure	45	15.6	14.5		17.8	23.0		22.2	28.9		
Pneumonia/Influenza	52	21.2	16.7	7.7	28.8	23.0	8.9	30.8	26.9	7.6	
Chronic Obstructive Pulmonary Disease	25	12.0	7.3		12.0	13.2		20.0	17.6		
Transient Cerebral Ischemia	24	0.0	1.3		4.2	3.0		12.5	4.9		
Stroke	31	16.1	20.9		22.6	27.0		25.8	30.5		
Hip Fracture	35	2.9	7.6		14.3	13.0		14.3	16.4		
Sepsis	7	14.3	24.9		14.3	33.2		14.3	38.8		
PROCEDURES:											
Angioplasty	17	0.0	3.8		0.0	4.6		0.0	5.4		
Coronary Artery Bypass Graft	27	7.4	4.8		11.1	6.7		11.1	7.6		
Initial Pacemaker Insertion	12	8.3	3.9		8.3	7.8		8.3	11.0		
Carotid Endarterectomy	2	0.0	0.6		0.0	1.3		0.0	2.1		
Hip Replacement/Reconstruction	36	0.0	2.1		8.3	3.7		8.3	5.0		
Open Reduction of Hip Fracture	23	4.3	6.7		8.7	12.2		8.7	15.7		
Prostatectomy	45	2.2	1.6		4.4	3.9		6.7	6.4		
Cholecystectomy	31	6.5	2.5		6.5	4.6		6.5	6.0		
Hysterectomy	26	0.0	0.3		0.0	0.7		0.0	1.2		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HUMANA HOSPITAL OVERLAND PARK Medicare Provider Number: 170176

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	74.9 years	Cancer	6.0 %
Proportion female	•	Chronic cardiovascular disease	
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.8 %
Referred by personal or HMO physician	54.1 %	Chronic renal disease	2.5 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	18.4 %
Admitted for elective procedure	26.0 %	Cerebrovascular degeneration	5.4 %
Admitted for emergency	46.2 %	Diabetes mellitus	5.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	62.2%	Hospital	7.6 Days
State	22.1%	State	7.3 Days
Outside State	15.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds 400	Burn Unit No
Occupancy Rate	Cardiac Intensive Care No
Ownership/Control Private, For Profit	Comprehensive Geriatric No
Medicare Discharges 25.3 %	Hospice Care No
Case Mix Index (CMI) 1.4563	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 287	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Licensed Fractical Naises	Psychiatric No
** Except for CMI	Medicare Swing Beds No

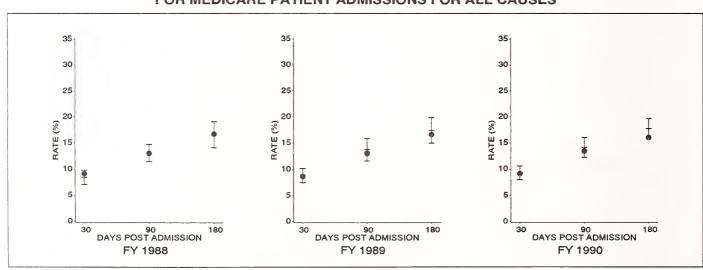
^{*} Not used in calculating mortality rates

HUTCHINSON HOSPITAL CORPORATION 1701 E 23RD ST HUTCHINSON, KS 67502 Medicare Provider Number: 170020

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
		3	30 DAYS		9	0 DAYS	3	180	180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	2077	9.1	9.3	0.6	13.4	14.1	0.9	16.0	17.7	1.0	
CONDITIONS:											
Acute Myocardial Infarction	68	35.3	28.2	6.1	38.2	31.4	6.0	38.2	34.2	5.9	
Congestive Heart Failure	91	9.9	14.4	5.9	18.7	22.8	6.1	26.4	29.4	5.4	
Pneumonia/Influenza	152	16.4	13.9	3.5	21.7	19.3	3.9	23.7	23.0	3.5	
Chronic Obstructive Pulmonary Disease	18	16.7	9.8		16.7	16.7		16.7	21.5		
Transient Cerebral Ischemia	31	0.0	1.6		0.0	3.7		6.5	6.5		
Stroke	99	26.3	18.9	7.0	35.4	25.8	6.3	38.4	29.9	6.3	
Hip Fracture	90	2.2	6.3	4.1	6.7	11.3	5.8	8.9	15.1	7.3	
Sepsis	47	17.0	30.4	••••	23.4	39.4		36.2	44.5		
PROCEDURES:											
Angioplasty	1	0.0	1.1		0.0	1.8		0.0	2.7		
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	13	0.0	2.7		0.0	5.8		0.0	8.9		
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	80	0.0	3.4	3.7	3.8	6.3	5.2	3.8	8.7	6.2	
Open Reduction of Hip Fracture	20	10.0	6.2		10.0	12.3		15.0	17.1		
Prostatectomy	76	0.0	1.2	1.5	0.0	2.8	2.4	0.0	4.7	3.3	
Cholecystectomy	43	4.7	2.8		4.7	5.0		7.0	6.3		
Hysterectomy	16	0.0	1.3		0.0	2.7		0.0	4.1		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



HUTCHINSON HOSPITAL CORPORATION

Medicare Provider Number: 170020

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	76.7 years	Cancer	8.3 %
Proportion female	58.7 %	Chronic cardiovascular disease	37.7 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.0 %
Referred by personal or HMO physician	61.4 %	Chronic renal disease	1.2 %
Transferred from skilled nursing facility	0.8 %	Chronic pulmonary disease	15.3 %
Admitted for elective procedure	0.7 %	Cerebrovascular degeneration	4.8 %
Admitted for emergency	1.3 %	Diabetes mellitus	6.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	Hospital	7.4 Days
State	State	7.3 Days
Outside State	National	8.6 Days
Total		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	90
PROFILE:	SPECIALTY SERVICES:
Total Beds 172	Burn Unit No
Occupancy Rate 75.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges(Not Available)	Hospice Care Yes
Case Mix Index (CMI) 1.2330	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 73	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns 0	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
, , , , , , , , , , , , , , , , , , ,	Alcohol/Drug No
Registered Nurses	RehabilitationYes
Licensed Practical Nurses	Psychiatric Yes
** Except for CMI	Medicare Swing Beds Yes

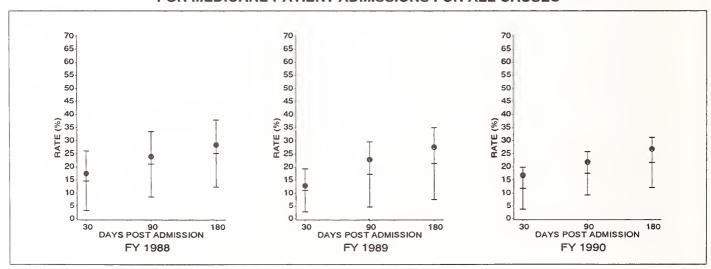
^{*} Not used in calculating mortality rates

JEFFERSON COUNTY MEMORIAL HOSPITAL ROUTE 1, BOX 1 WINCHESTER, KS 66097 Medicare Provider Number: 170131

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
	30 DAYS		9	0 DAYS	3	18	180 DAYS			
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	овѕ	PRED	SD*	OBS	PRED	SD°
ALL CAUSES	120	16.7	11.7	4.1	21.7	17.4	4.1	26.7	21.5	4.8
CONDITIONS:										
Acute Myocardial Infarction	2	0.0	29.6		0.0	32.1		0.0	34.5	
Congestive Heart Failure	8	50.0	12.3		50.0	19.9		50.0	26.0	
Pneumonia/Influenza	14	28.6	18.9		28.6	26.5		35.7	31.4	
Chronic Obstructive Pulmonary Disease	4	50.0	9.6		50.0	17.7		50.0	22.7	
Transient Cerebral Ischemia	3	0.0	1.5		0.0	3.6		0.0	6.1	
Stroke	6	16.7	20.2		16.7	27.8		50.0	32.3	
Hip Fracture	1	0.0	3.3		0.0	5.4		0.0	7.8	
Sepsis	3	33.3	14.3		66.7	21.3		66.7	24.7	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	10	0.0	1.8		0.0	4.6		20.0	8.0	
Cholecystectomy	2	0.0	1.2		0.0	1.8		0.0	2.5	
Hysterectomy	1	0.0	0.2		0.0	0.4	****	0.0	0.8	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



JEFFERSON COUNTY MEMORIAL HOSPITAL Medicare Provider Number: 170131

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	81.6 years	Cancer	5.8 %
Proportion female	58.3 %	Chronic cardiovascular disease	41.7 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	93.3 %	Chronic renal disease	2.5 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	16.7 %
Admitted for elective procedure	0.8 %	Cerebrovascular degeneration	7.5 %
Admitted for emergency	4.2 %	Dlabetes mellitus	4.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:	MEDICARE AVERAGE LENGTH OF STAY:
County/City	% Hospital 6.2 Days
State	% State 7.3 Days
Outside State	% National 8.6 Days
Total 100.09	%

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE: Total Beds	SPECIALTY SERVICES: Burn Unit
Licensed Practical Nurses (Not Available)	Rehabilitation
** Except for CMI	Medicare Swing BedsYes

^{*} Not used in calculating mortality rates

JEWELL COUNTY HOSPITAL 100 CREST VUE MANKATO, KS 66956 Medicare Provider Number: 170168

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		;	30 DAY	S	9	0 DAYS	6	18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	26	19.2	9.7		23.1	16.1		30.8	20.1	
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	5	20.0	13.3		20.0	21.2		60.0	26.7	
Pneumonia/Influenza	3	66.7	11.7		66.7	15.2		66.7	17.3	
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	0									
Stroke	1	0.0	17.5		0.0	26.0		0.0	30.3	
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

JEWELL COUNTY HOSPITAL Medicare Provider Number: 170168

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:
Average age at admission 80.0 years	Cancer 7.7 %
Proportion female 65.4 %	Chronic cardiovascular disease 26.9 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.0 %
Referred by personal or HMO physician 42.3 %	Chronic renal disease 0.0 %
Transferred from skilled nursing facility 3.8 %	Chronic pulmonary disease 15.4 %
Admitted for elective procedure100.0 %	Cerebrovascular degeneration 0.0 %
Admitted for emergency 0.0 %	Diabetes mellitus 3.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	86.5%	Hospital	4.5 Days
State	2.7%	State	7.3 Days
Outside State	10.8%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	0
PROFILE:	SPECIALTY SERVICES:
Total Beds 61	Burn Unit No
Occupancy Rate 55.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 36.3 %	Hospice Care No
Case Mix Index (CMI) 0.8945	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 7	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
Medical Residents/Interns0	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/DrugNo
Licensed Practical Nurses	Rehabilitation No
LICENSEU FIACICAI NUISES	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

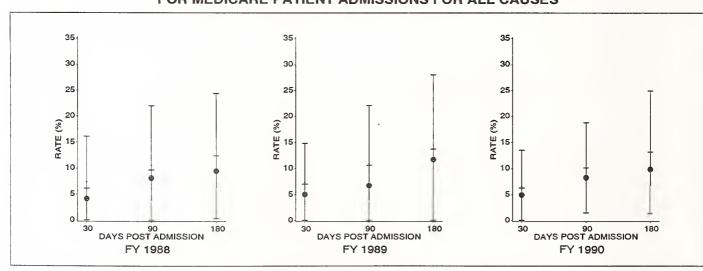
^{*} Not used in calculating mortality rates

KEARNY COUNTY HOSPITAL
500 THORPE AVE, BOX 744
LAKIN, KS 67860
Medicare Provider Number: 170100

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)								
		30 DAY	S	9	DAYS	3	18	0 DAYS	,
	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
61	4.9	6.2	3.6	8.2	10.1	4.3	9.8	13.1	5.9
1	0.0	15.5		0.0	19.9		0.0	22.5	
1	0.0	9.2	••••	0.0	16.0		0.0	20.2	
8	12.5	11.9		12.5	16.9		12.5	20.1	
1	0.0	6.6		0.0	13.4		0.0	18.6	
1	0.0	1.4		0.0	3.4		0.0	5.9	
2	0.0	8.3		0.0	11.3		0.0	13.4	
0									
2	50.0	22.8		50.0	30.7		50.0	35.7	
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^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



KEARNY COUNTY HOSPITAL

Medicare Provider Number: 170100

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	77.1 years	Cancer	3.3 %
Proportion female	55.7 %	Chronic cardiovascular disease	14.8 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.6 %
Referred by personal or HMO physician	59.0 %	Chronic renal disease	0.0 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	6.6 %
Admitted for elective procedure	52.5 %	Cerebrovascular degeneration	4.9 %
Admitted for emergency	1.6 %	Diabetes mellitus	6.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	83.0%	Hospital	4.8 Days
State	14.0%	State	7.3 Days
Outside State	3.0%	National	8.6 Days
Total	100.0%		
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds 20	Burn Unit No
Occupancy Rate 25.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive GeriatricYes
Medicare Discharges 37.8 %	Hospice Care No
Case Mix Index (CMI) 0.7725	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians2	Other Intensive Care No
Percent of Physicians Board Certified Specialists 50.0 %	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug No
	Rehabilitation No
Licensed Practical Nurses 1	Psychiatric No
** Except for CMI	Medicare Swing BedsYes

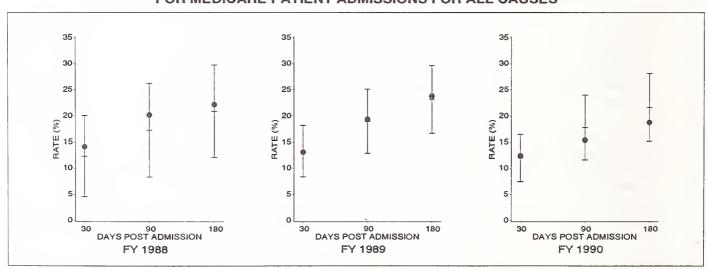
^{*} Not used in calculating mortality rates

KINGMAN COMMUNITY HOSPITAL
750 AVENUE D WEST
KINGMAN, KS 67068
Medicare Provider Number: 170052

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	ORTALIT	Y RATE	S (%)			
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	234	12.4	12.0	2.3	15.4	17.8	3.1	18.8	21.7	3.3
CONDITIONS:										
Acute Myocardial Infarction	10	20.0	32.3		20.0	35.9		20.0	39.2	
Congestive Heart Failure	17	11.8	17.5		11.8	27.5		17.6	33.7	
Pneumonia/Influenza	19	26.3	18.2		42.1	25.4		42.1	29.5	
Chronic Obstructive Pulmonary Disease	4	0.0	6.1		0.0	10.1		0.0	13.5	
Transient Cerebral Ischemia	3	0.0	0.9		0.0	2.2		0.0	3.7	
Stroke	7	0.0	18.8		0.0	27.0		42.9	32.0	
Hip Fracture	0									
Sepsis	2	0.0	16.4		0.0	23.9		0.0	28.6	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	2	0.0	2.3		0.0	6.2		0.0	11.3	
Cholecystectomy	4	25.0	1.6		25.0	2.8		25.0	3.8	
Hysterectomy	1	0.0	0.1		0.0	0.1		0.0	0.2	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



KINGMAN COMMUNITY HOSPITAL Medicare Provider Number: 170052

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	78.0 years	Cancer	5.6 %
Proportion female	61.1 %	Chronic cardiovascular disease	40.6 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.4 %
Referred by personal or HMO physician	66.2 %	Chronic renal disease	4.3 %
Transferred from skilled nursing facility	0.4 %	Chronic pulmonary disease	9.0 %
Admitted for elective procedure	17.1 %	Cerebrovascular degeneration	5.1 %
Admitted for emergency	24.4 %	Diabetes mellitus	9.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

.4%	Li conital	
	Hospital	4.7 Days
.0%	State	7.3 Days
.6% 	National	8.6 Days
.0%		
. (6% 	6% National

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 32.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 44.2 %	Hospice Care No
Case Mix Index (CMI) 1.0677	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/DrugYes
Licensed Practical Nurses	RehabilitationNo
Licensed Fractical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

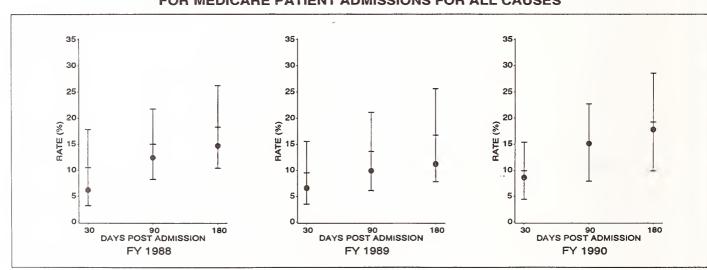
^{*} Not used in calculating mortality rates

KIOWA COUNTY MEMORIAL HOSPITAL
501 S WALNUT ST
GREENSBURG, KS 67054
Medicare Provider Number: 170053

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				M	ORTALIT	Y RATE	S (%)			
		3	30 DAY	S	9	0 DAYS	3	18	0 DAYS	>
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD°	OBS	PRED	SD*
ALL CAUSES	152	8.6	9.9	2.7	15.1	15.3	3.7	17.8	19.2	4.7
CONDITIONS:										
Acute Myocardial Infarction	4	25.0	33.8		25.0	40.8		25.0	44.9	
Congestive Heart Fallure	4	0.0	9.4		0.0	14.8		0.0	20.0	
Pneumonia/influenza	13	0.0	15.4		0.0	21.6		0.0	25.8	
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	2	0.0	0.7		0.0	1.7		0.0	2.9	
Stroke	7	42.9	13.1		57.1	19.1		57.1	22.8	
Hip Fracture	0									
Sepsis	1	100.0	35.2		100.0	40.8		100.0	44.9	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
initial Pacemaker insertion	0									
Carotid Endarterectomy	0									
HIp Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	1	0.0	0.2		0.0	0.6		0.0	1.0	
Choiecystectomy	3	0.0	0.7		0.0	1.1		0.0	1.6	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



KIOWA COUNTY MEMORIAL HOSPITAL Medicare Provider Number: 170053

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	78.1 years	Cancer	10.5 %
Proportion female	62.5 %	Chronic cardiovascular disease	37.5 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.7 %
Referred by personal or HMO physician	37.5 %	Chronic renal disease	1.3 %
Transferred from skilled nursing facility	3.3 %	Chronic pulmonary disease	17.1 %
Admitted for elective procedure	18.4 %	Cerebrovascular degeneration	8.6 %
Admitted for emergency	3.3 %	Diabetes mellitus	3.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	80.3%	Hospital	5.2 Days
State	17.2%	State	7.3 Days
Outside State	2.5%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	90
PROFILE:	SPECIALTY SERVICES:
Total Beds 24	Burn Unit No
Occupancy Rate 50.0 %	Cardiac Intensive Care No
Ownership/Control Church	Comprehensive Geriatric No
Medicare Discharges 46.5 %	Hospice Care No
Case Mix Index (CMI) 0.9049	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 3	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses 11	Alcohol/DrugNo
Licensed Practical Nurses	Rehabilitation
Licensed Fractical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

KIOWA DISTRICT HOSPITAL

810 DRUMM ST

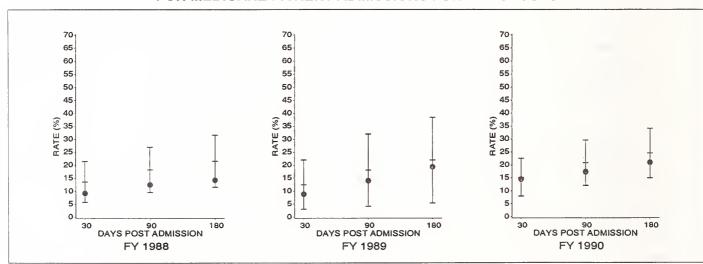
KIOWA, KS 67070

Medicare Provider Number: 170081

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
			30 DAY	S	3	18	0 DAYS			
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	110	14.5	15.2	3.6	17.3	20.8	4.4	20.9	24.5	4.8
CONDITIONS:										
Acute Myocardial Infarction	12	16.7	32.1		25.0	35.2		25.0	38.2	
Congestive Heart Failure	4	0.0	19.8		0.0	25.6		25.0	30.6	
Pneumonia/Influenza	18	11.1	12.4		11.1	18.3		16.7	21.6	
Chronic Obstructive Pulmonary Disease	1	0.0	5.8		0.0	11.8		0.0	18.4	
Transient Cerebral Ischemia	2	50.0	1.4		50.0	3.3	••••	50.0	5.7	
Stroke	7	57.1	34.0		71.4	40.2		71.4	43.4	
Hip Fracture	0									
Sepsis	2	0.0	12.8		50.0	23.6		50.0	29.4	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



KIOWA DISTRICT HOSPITAL

Medicare Provider Number: 170081

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 78.0 years	Cancer 3.6 %
Proportion female 54.5 %	Chronic cardiovascular disease 48.2 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.9 %
Referred by personal or HMO physician 90.0 %	Chronic renal disease 3.6 %
Transferred from skilled nursing facility 0.0 %	Chronic pulmonary disease 10.0 %
Admitted for elective procedure 5.5 %	Cerebrovascular degeneration 4.5 %
Admitted for emergency 36.4 %	Diabetes mellitus 7.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

County/City	58.6%	Hospital	8.0 Days
state	5.2%	State	7.3 Days
Outside State	36.2%	National	8.6 Days

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	390
PROFILE:	SPECIALTY SERVICES:
Total Beds 24	Burn Unit No
Occupancy Rate 20.0 %	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Gerlatric No
Medicare Discharges 53.6 %	Hospice Care No
Case Mix Index (CMI) 1.0956	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug No
	Rehabilitation No
Licensed Practical Nurses 0	Psychiatric No
** Except for CMI	Medicare Swing Beds No

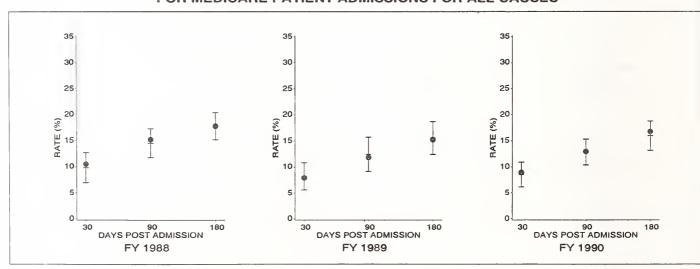
^{*} Not used in calculating mortality rates

LABETTE COUNTY MEDICAL CENTER
SOUTH HWY 59
PARSONS, KS 67357
Medicare Provider Number: 170120

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	ORTALIT	Y RATE	S (%)								
		-3	O DAY	S	9	0 DAYS	3	18	0 DAYS	>					
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*					
ALL CAUSES	1001	8.9	8.5	1.2	12.9	12.8	1.2	16.7	15.9	1.4					
CONDITIONS:															
Acute Myocardial Infarction	27	40.7	29.8		40.7	33.6		44.4	37.0						
Congestive Heart Failure	31	25.8	16.3		41.9	26.4		48.4	33.0						
Pneumonia/Influenza	100	17.0	16.6	5.0	22.0	23.0	4.3	27.0	27.0	4.					
Chronic Obstructive Pulmonary Disease	5	0.0	6.9		20.0	12.1		20.0	17.4						
Transient Cerebral Ischemia	14	0.0	1.4		0.0	3.4		0.0	5.6						
Stroke	32	21.9	20.5		28.1	27.6		34.4	31.5						
Hip Fracture	41	7.3	5.0		9.8	9.8		9.8	13. 8						
Sepsis	12	8.3	19.8		25.0	28.1		33.3	32.5						
PROCEDURES:															
Angioplasty	0														
Coronary Artery Bypass Graft	0														
Initial Pacemaker Insertion	6	0.0	9.0		0.0	13.4		16.7	17.1						
Carotid Endarterectomy	5	0.0	1.2		0.0	2.3		0.0	3.7						
Hip Replacement/Reconstruction	38	0.0	1.9		2.6	4.1		2.6	6.0						
Open Reduction of Hip Fracture	23	13.0	4.9		13.0	9.7		13.0	13.6						
Prostatectomy	23	0.0	8.0		0.0	2.0		0.0	3.6						
Cholecystectomy	28	7.1	2.7		10.7	5.4		14.3	7.3						
Hysterectomy	18	0.0	0.3		0.0	0.9		0.0	1.6						

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



LABETTE COUNTY MEDICAL CENTER Medicare Provider Number: 170120

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	75.7 years	Cancer	6.3 %
Proportion female	60.5 %	Chronic cardiovascular disease	29.2 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.5 %
Referred by personal or HMO physician	47.4 %	Chronic renal disease	2.3 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	10.8 %
Admitted for elective procedure	28.8 %	Cerebrovascular degeneration	4.1 %
Admitted for emergency	6.9 %	Diabetes mellitus	6.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSIO	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	68.0%	Hospital	6.7 Days
State	29.8%	State	7.3 Days
Outside State	2.2%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	90
PROFILE:	SPECIALTY SERVICES:
Total Beds 85	Burn Unit No
Occupancy Rate 66.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges	Hospice Care No
Case Mix Index (CMI) 1.1929	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Licensed Flactical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds No

^{*} Not used in calculating mortality rates

LANE COUNTY HOSPITAL

243 S SECOND, BOX 969 DIGHTON, KS 67839 Medicare Provider Number: 170108

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
		3	30 DAY	S	9	0 DAYS		18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	47	8.5	9.8		17.0	13.9		17.0	17.3	
CONDITIONS:										
Acute Myocardial Infarction	2	50.0	13.0		50.0	15.8		50.0	18.0	
Congestive Heart Failure	2	0.0	14.6		0.0	21.9		0.0	28.5	
Pneumonia/Influenza	4	0.0	8.1		0.0	11.6		0.0	14.0	
Chronic Obstructive Pulmonary Disease	1	0.0	6.4		0.0	12.5		0.0	19.0	
Transient Cerebral Ischemia	1	0.0	0.4		0.0	1.0		0.0	1.8	
Stroke	3	0.0	11.4	*****	0.0	15.5		0.0	18.9	
Hip Fracture	1	0.0	2.3		0.0	4.9		0.0	8.1	
Sepsis	1	100.0	28.1		100.0	40.3		100.0	47.3	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	1	0.0	1.4	••••	0.0	2.8	*****	0.0	3.7	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

LANE COUNTY HOSPITAL Medicare Provider Number: 170108

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	79.3 years	Cancer	4.3 %
Proportion female	72.3 %	Chronic cardiovascular disease	34.0 %
DMISSION SOURCES/TYPES:		Chronic liver disease	2.1 %
Referred by personal or HMO physician	95.7 %	Chronic renal disease	2.1 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	6.4 %
Admitted for elective procedure	95.7 %	Cerebrovascular degeneration	0.0 %
Admitted for emergency	0.0 %	Diabetes mellitus	10.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	91.3%	Hospital	3.5 Days
State	5.8%	State	7.3 Days
Outside State	2.9%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 198	9
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 74.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 55.6 %	Hospice CareYes
Case Mix Index (CMI) 0.9874	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 3	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
modical residency members	Alcohol/DrugNo
Registered Nurses	Rehabilitation No
Licensed Fractical Nurses	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

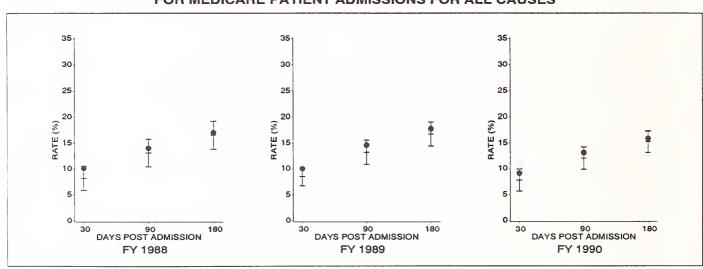
LAWRENCE MEMORIAL HOSPITAL

325 MAINE ST LAWRENCE, KS 66044 Medicare Provider Number: 170137

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		3	0 DAY	S	9	90 DAYS			180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	1407	9.1	7.8	1.1	13.1	12.0	1.1	15.8	15.2	1.0	
CONDITIONS:											
Acute Myocardial Infarction	26	26.9	25.8		30.8	28.4		30.8	31.0		
Congestive Heart Failure	68	14.7	13.9	4.4	23.5	21.7	5.7	29.4	27.9	5.6	
Pneumonia/Influenza	61	19.7	12.2	7.2	21.3	16.8	8.5	27.9	19.9	9.0	
Chronic Obstructive Pulmonary Disease	27	0.0	4.7		3.7	8.9		3.7	12.5		
Transient Cerebral Ischemia	26	0.0	2.8		3.8	6.6		3.8	10.5		
Stroke	40	20.0	21.3		25.0	28.2		32.5	32.3		
Hip Fracture	45	4.4	7.5		4.4	13.3		6.7	17.2		
Sepsis	18	16.7	23.0		33.3	32.3		33.3	37.5		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	12	0.0	2.1		8.3	4.7		8.3	7.3		
Carotid Endarterectomy	2	0.0	1.3		0.0	2.0		0.0	2.9		
Hip Replacement/Reconstruction	47	2.1	2.5		2.1	4.5		4.3	6.2		
Open Reduction of Hip Fracture	20	5.0	7.4		5.0	13.7		5.0	18.0		
Prostatectomy	55	0.0	0.9	1.4	1.8	2.1	2.2	3.6	3.6	3.	
Cholecystectomy	28	3.6	1.3		3.6	2.4		3.6	3.2		
Hysterectomy	9	0.0	0.5		0.0	1.3		0.0	2.4		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



LAWRENCE MEMORIAL HOSPITAL Medicare Provider Number: 170137

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	74.9 years	Cancer	6.5 %
Proportion female	59.1 %	Chronic cardiovascular disease	33.1 %
DMISSION SOURCES/TYPES:		Chronic liver disease	0.7 %
Referred by personal or HMO physician	46.2 %	Chronic renal disease	1.5 %
Transferred from skilled nursing facility	0.6 %	Chronic pulmonary disease	12.4 %
Admitted for elective procedure	19.5 %	Cerebrovascular degeneration	5.0 %
Admitted for emergency	26.3 %	Diabetes mellitus	5.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	77.7%	Hospital	7.2 Days
State	19.7%	State	7.3 Days
Outside State	2.6%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE: Total Beds	SPECIALTY SERVICES: Burn Unit No Cardiac Intensive Care No Comprehensive Geriatric No Hospice Care No Medical/Surgical Intensive Care Yes Organ/Tissue Transplant No Other Intensive Care No Trauma Center No OTHER SPECIALTY/HOSPITAL-BASED SERVICES: Alcohol/Drug No
Licensed Practical Nurses (Not Available) ** Except for CMI	Rehabilitation

^{*} Not used in calculating mortality rates

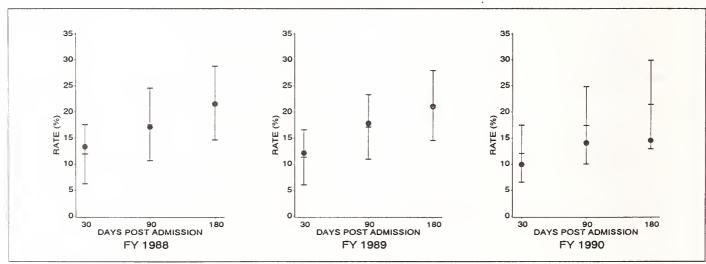
LINCOLN COUNTY HOSPITAL

624 N 2ND ST LINCOLN, KS 67455 Medicare Provider Number: 170056

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	172	9.9	12.0	2.7	14.0	17.4	3.7	14.5	21.4	4.2
CONDITIONS:										
Acute Myocardial Infarction	6	33.3	35.1		33.3	39.9		33.3	44.6	
Congestive Heart Failure	4	0.0	13.4		0.0	20.0		25.0	25.1	
Pneumonia/Influenza	29	10.3	15.3		17.2	21.1		17.2	25.3	
Chronic Obstructive Pulmonary Disease	3	0.0	6.8		0.0	12.7		0.0	17.4	
Transient Cerebral Ischemia	5	0.0	1.2		20.0	2.8		20.0	4.7	
Stroke	6	0.0	25.6		0.0	32.4		0.0	36.6	
Hip Fracture	1	0.0	2.3		0.0	5.4		0.0	9.1	
Sepsis	2	50.0	37.8		50.0	44.9		50.0	50.0	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



LINCOLN COUNTY HOSPITAL Medicare Provider Number: 170056

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	80.6 years	Cancer	5.2 %
Proportion female	65.1 %	Chronic cardiovascular disease	48.8 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	96.5 %	Chronic renal disease	0.6 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	12.2 %
Admitted for elective procedure	0.0 %	Cerebrovascular degeneration	5.2 %
Admitted for emergency	0.0 %	Diabetes mellitus	5.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	83.5%	Hospital	5.6 Days
State	15.8%	State	7.3 Days
Outside State	0.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	90
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 73.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 70.8 %	Hospice Care No
Case Mix Index (CMI) 0.9713	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians2	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses 6	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Licensed Flactical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds No

^{*} Not used in calculating mortality rates

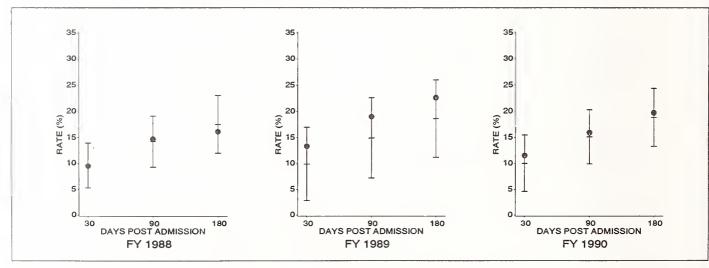
LINDSBORG COMMUNITY HOSPITAL

605 W LINCOLN ST LINDSBORG, KS 67456 Medicare Provider Number: 170101

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				МС	ORTALIT	Y RATE	S (%)			
		3	30 DAY	S	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD°	OBS	PRED	SD*
ALL CAUSES	208	11.5	10.0	2.7	15.9	15.1	2.6	19.7	18.8	2.8
CONDITIONS:										
Acute Myocardial Infarction	3	66.7	21.0		66.7	23.1		66.7	25.5	
Congestive Heart Failure	11	18.2	15.0		18.2	22.4		27.3	29.0	
Pneumonia/Influenza	31	9.7	11.4		16.1	15.6		19.4	18.5	
Chronic Obstructive Pulmonary Disease	3	0.0	6.2		0.0	11.5		0.0	17.1	
Transient Cerebral Ischemia	2	0.0	0.9		0.0	2.3		0.0	3.9	
Stroke	6	50.0	18.5		66.7	25.3		66.7	29.7	
Hip Fracture	8	25.0	6.0		37.5	11.5		37.5	15.5	
Sepsis	9	33.3	19.6		33.3	29.9		33.3	35.5	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	5	40.0	5.6		40.0	10.5		40.0	14.1	
Open Reduction of Hip Fracture	4	25.0	5.1		25.0	10.2		25.0	13.7	
Prostatectomy	0									
Cholecystectomy	4	0.0	1.1		0.0	1.9		0.0	2.5	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



LINDSBORG COMMUNITY HOSPITAL Medicare Provider Number: 170101

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	79.8 years	Cancer	7.7 %
Proportion female	64.9 %	Chronic cardiovascular disease	38.5 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO phy	/sician 51.9 %	Chronic renal disease	5.3 %
Transferred from skilled nursing fa	acility 1.0 %	Chronic pulmonary disease	12.5 %
Admitted for elective procedure	86.1 %	Cerebrovascular degeneration	1.4 %
Admitted for emergency	7.2 %	Diabetes mellitus	6.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	80.4%	Hospital	6.0 Days
State	18.4%	State	7.3 Days
Outside State	1.2%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds 39	Burn Unit No
Occupancy Rate 33.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Gerlatric No
Medicare Discharges 42.9 %	Hospice Care No
Case Mix Index (CMI) 1.1072	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 3	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug No
	Rehabilitation No
Licensed Practical Nurses 7	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

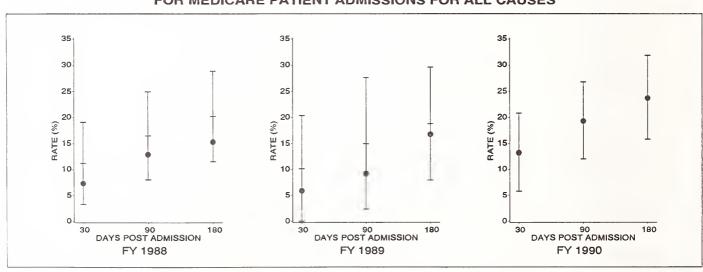
^{*} Not used in calculating mortality rates

LOGAN COUNTY HOSPITAL 211 CHERRY ST OAKLEY, KS 67748 Medicare Provider Number: 170134

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	ALITY RATES (%)						
		- ;	30 DAYS			90 DAYS			180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	114	13.2	13.3	3.8	19.3	19.4	3.7	23.7	23.8	4.0	
CONDITIONS:											
Acute Myocardial Infarction	6	50.0	26.4		50.0	28.5	••••	50.0	30.8		
Congestive Heart Failure	17	17.6	15.5		29.4	24.9		29.4	31.9		
Pneumonia/Influenza	15	20.0	23.4		20.0	31.6		20.0	36.4		
Chronic Obstructive Pulmonary Disease	1	0.0	2.4		0.0	5.0		0.0	7.2		
Transient Cerebral Ischemia	2	0.0	0.9		0.0	2.0	*****	0.0	3.4		
Stroke	4	0.0	12.0		25.0	15.4		25.0	18.0		
Hip Fracture	0										
Sepsis	0										
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	0										
Open Reduction of Hip Fracture	0										
Prostatectomy	0										
Cholecystectomy	1	0.0	0.9		0.0	1.6		0.0	2.1		
Hysterectomy	0										

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



LOGAN COUNTY HOSPITAL Medicare Provider Number: 170134

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission 79	9.7 years	Cancer	5.3 %
Proportion female 57	7.9 %	Chronic cardiovascular disease	46.5 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.9 %
Referred by personal or HMO physician 39	9.5 %	Chronic renal disease	1.8 %
Transferred from skilled nursing facility	1.8 %	Chronic pulmonary disease	7.9 %
Admitted for elective procedure 10	0.5 %	Cerebrovascular degeneration	8.8 %
Admitted for emergency	1.8 %	Diabetes mellitus	13.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	80.3%	Hospital	7.2 Days
State	16.2%	State	7.3 Days
Outside State	3.5%	National	8.6 Days
Total	100.0%		

PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 41.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 49.3 %	Hospice Care No
Case Mix Index (CMI) 0.9946	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 1	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/DrugNo
Registered Nurses	
Licensed Practical Nurses	RehabilitationNo
	Psychiatric N

^{*} Not used in calculating mortality rates

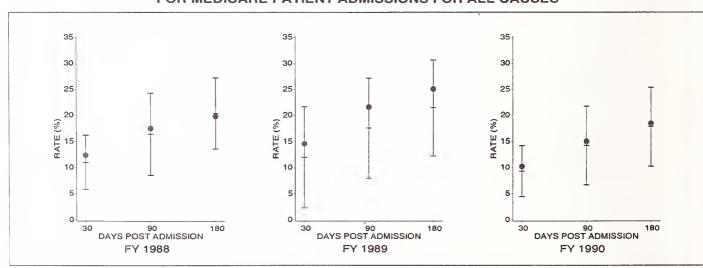
MAUDE NORTON MEMORIAL CITY HOSPITAL

220 N PENNSYLVANIA COLUMBUS, KS 66725 Medicare Provider Number: 170043

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

			30 DAYS			90 DAYS			180 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	147	10.2	9.3	2.4	15.0	14.2	3.8	18.4	17.8	3.8
CONDITIONS:										
Acute Myocardial Infarction	6	33.3	20.5		33.3	22.9		50.0	25.6	
Congestive Heart Failure	17	29.4	15.8		29.4	25.8	•	35.3	33.1	
Pneumonia/Influenza	9	11.1	10.7		22.2	16.1	*****	22.2	19.1	
Chronic Obstructive Pulmonary Disease	1	0.0	8.9		0.0	18.4		0.0	25.6	*****
Transient Cerebral Ischemia	3	0.0	1.4		33.3	3.4		33.3	6.0	
Stroke	3	0.0	17.0		33.3	25.2		33.3	30.0	
Hip Fracture	2	0.0	3.0		0.0	5.3		0.0	7.5	
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	1	0.0	0.4		0.0	1.1	••••	100.0	2.0	
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MAUDE NORTON MEMORIAL CITY HOSPITAL Medicare Provider Number: 170043

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	78.6 years	Cancer	3.4 %
Proportion female	68.7 %	Chronic cardiovascular disease	25.2 %
DMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	29.3 %	Chronic renal disease	1.4 %
Transferred from skilled nursing facility	2.0 %	Chronic pulmonary disease	17.7 %
Admitted for elective procedure	8.2 %	Cerebrovascular degeneration	1.4 %
Admitted for emergency	4.8 %	Diabetes mellitus	4.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	1:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	86.8%	Hospital	4.2 Days
State	9.1%	State	7.3 Days
Outside State	4.1%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	1990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 17.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 64.3 %	Hospice Care No
Case Mix Index (CMI) 1.0014	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
·	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/Drug No
Registered Nurses 12	
Licensed Practical Nurses 0	Rehabilitation No
	Psychiatric No
** Except for CMI	Medicare Swing BedsYes

^{*} Not used in calculating mortality rates

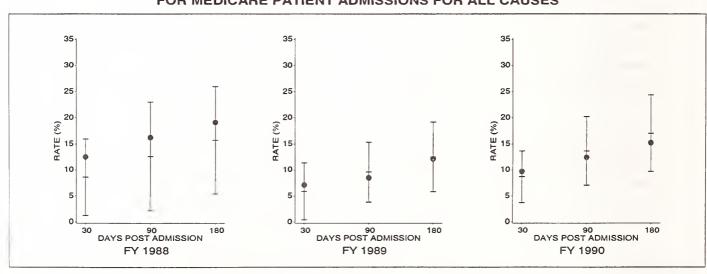
MEADE DISTRICT HOSPITAL

510 E CARTHAGE MEADE, KS 67864 Medicare Provider Number: 170055

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
		- 3	30 DAY	S	9	0 DAYS	3	18	;		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	145	9.7	8.7	2.5	12.4	13.6	3.3	15.2	17.0	3.7	
CONDITIONS:											
Acute Myocardial Infarction	3	100.0	46.3		100.0	52.1		100.0	56.2		
Congestive Heart Failure	9	44.4	24.2		55.6	37.9		66.7	45.1		
Pneumonia/Influenza	9	0.0	16.3		0.0	22.2		0.0	25.9		
Chronic Obstructive Pulmonary Disease	1	0.0	37.6		0.0	59.9		0.0	74.2		
Transient Cerebral Ischemia	0										
Stroke	6	0.0	21.5		0.0	32.0		33.3	38.3		
Hip Fracture	3	0.0	5.3		0.0	10.2		0.0	13.5		
Sepsis	0										
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	0										
Open Reduction of Hip Fracture	0										
Prostatectomy	12	0.0	0.9		0.0	2.2		0.0	3.8		
Cholecystectomy	5	0.0	2.2		0.0	4.1		0.0	5.3		
Hysterectomy	3	0.0	0.7		0.0	1.6		0.0	2.7		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MEADE DISTRICT HOSPITAL

Medicare Provider Number: 170055

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 76.7	7 years	Cancer	6.2 %
Proportion female	8 %	Chronic cardiovascular disease	35.9 %
DMISSION SOURCES/TYPES:		Chronic liver disease	2.1 %
Referred by personal or HMO physician 43.4	4 %	Chronic renal disease	2.1 %
Transferred from skilled nursing facility 0.7	7 %	Chronic pulmonary disease	14.5 %
Admitted for elective procedure 59.3	3 %	Cerebrovascular degeneration	4.1 %
Admitted for emergency 1.4	4 %	Diabetes mellitus	4.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	84.0%	Hospital	5.8 Days
State	11.6%	State	7.3 Days
Dutside State	4.4%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 26.0 %	Cardiac Intensive Care No
Ownership/Control Church	Comprehensive GeriatricYes
Medicare Discharges 47.4 %	Hospice CareN
Case Mix Index (CMI) 1.0492	Medical/Surgical Intensive Care N
TAFFING:	Organ/Tissue Transplant N
Total Number of Physicians2	Other Intensive Care N
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center N
·	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/Drug N
Registered Nurses9	RehabilitationN
Licensed Practical Nurses	Psychiatric N
Except for CMI	Medicare Swing BedsYe

^{*} Not used in calculating mortality rates

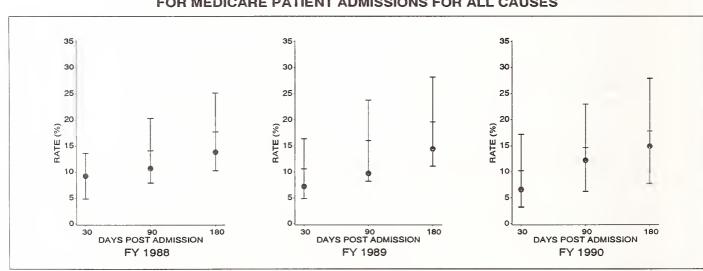
MEDICINE LODGE MEMORIAL HOSPITAL

710 N WALNUT ST MEDICINE LODGE, KS 67104 Medicare Provider Number: 170102

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)						S (%)			
		3	30 DAY	S	9	0 DAYS	3	18	>	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD°	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	181	6.6	10.2	3.5	12.2	14.6	4.2	14.9	17.8	5.0
CONDITIONS:										
Acute Myocardial Infarction	2	50.0	46.5		50.0	51.6		50.0	53.8	
Congestive Heart Failure	8	12.5	14.4		12.5	22.2		25.0	28.2	
Pneumonia/Influenza	47	8.5	12.7		12.8	17.6		14.9	20.4	
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	5	0.0	1.6		0.0	4.1		0.0	7.2	
Stroke	8	12.5	23.4		25.0	29.7		25.0	33.6	
Hip Fracture	2	0.0	4.8		0.0	8.8		0.0	12.2	
Sepsis	4	0.0	24.5		0.0	28.1		0.0	31.8	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	6	0.0	1.0		0.0	1.7		0.0	2.1	
Hysterectomy	1	0.0	0.1		0.0	0.2		0.0	0.2	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MEDICINE LODGE MEMORIAL HOSPITAL Medicare Provider Number: 170102

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	75.4 years	Cancer	5.0 %
Proportion female	63.5 %	Chronic cardiovascular disease	34.3 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.7 %
Referred by personal or HMO physician	46.4 %	Chronic renal disease	3.3 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	11.6 %
Admitted for elective procedure	5.5 %	Cerebrovascular degeneration	6.1 %
Admitted for emergency	26.5 %	Diabetes mellitus	3.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	78.4%	Hospital	5.2 Days
State	19.9%	State	7.3 Days
Outside State	1.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1989	e
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 21.0 %	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Geriatric No
Medicare Discharges 48.1 %	Hospice Care No
Case Mix Index (CMI) 1.0015	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Licensed Fractical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

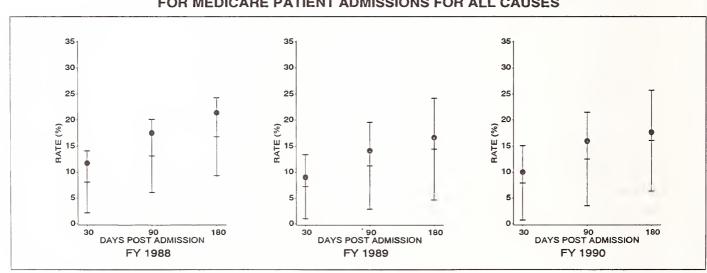
^{*} Not used in calculating mortality rates

MEMORIAL HOSPITAL 1105 SUNSET MANHATTAN, KS 66502 Medicare Provider Number: 170037

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
		3	O DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	170	10.0	7.9	3.6	15.9	12.5	4.5	17.6	16.0	4.9
CONDITIONS:										
Acute Myocardial Infarction	5	20.0	26.7		20.0	30.1		20.0	33.1	
Congestive Heart Failure	6	0.0	15.9		0.0	24.9		0.0	31.0	
Pneumonia/Influenza	12	25.0	17.3		33.3	24.7		33.3	30.2	
Chronic Obstructive Pulmonary Disease	1	100.0	2.4		100.0	4.9		100.0	6.7	
Transient Cerebral Ischemia	3	0.0	2.3		0.0	5.7		0.0	9.4	
Stroke	5	20.0	11.0		20.0	17.2		20.0	20.9	
Hip Fracture	6	16.7	8.0		33.3	13.6		33.3	17.0	
Sepsis	3	0.0	24.9		0.0	33.4		0.0	39.1	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	2	0.0	3.8		0.0	7.2		0.0	10.0	
Open Reduction of Hip Fracture	4	25.0	8.8		50.0	15.3		50.0	19.1	
Prostatectomy	14	0.0	0.5		0.0	1.1		0.0	2.0	
Cholecystectomy	1	0.0	0.3		0.0	0.6		0.0	0.7	
Hysterectomy	11	0.0	0.1		0.0	0.2		0.0	0.5	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MEMORIAL HOSPITAL Medicare Provider Number: 170037

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	77.6 years	Cancer	7.6 %
Proportion female	58.2 %	Chronic cardiovascular disease	24.1 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	72.9 %	Chronic renal disease	1.8 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	11.2 %
Admitted for elective procedure	59.4 %	Cerebrovascular degeneration	7.6 %
Admitted for emergency	29.4 %	Diabetes mellitus	5.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	73.5%	Hospital	6.4 Days
State	23.1%	State	7.3 Days
Outside State	3.4%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	90
PROFILE:	SPECIALTY SERVICES:
Total Beds 76	Burn Unit No
Occupancy Rate 22.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges	Hospice Care No
Case Mix Index (CMI) 1.1080	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 57	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug No
	Rehabilitation No
Licensed Practical Nurses	Psychiatric No
** Except for CMI	Medicare Swing BedsYes

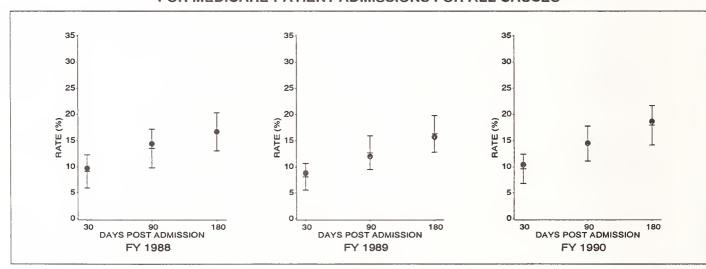
^{*} Not used in calculating mortality rates

MEMORIAL HOSPITAL
1000 HOSPITAL DRIVE
MCPHERSON, KS 67460
Medicare Provider Number: 170105

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
		:	0 DAY	s	9	0 DAYS	3		18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	0	BS	PRED	SD*
ALL CAUSES	469	10.4	9.6	1.4	14.5	14.4	1.7	18	3.6	17.9	1.9
CONDITIONS:											
Acute Myocardial Infarction	13	53.8	36.2		61.5	39.6		6	1.5	43.1	
Congestive Heart Failure	32	15.6	18.6		21.9	28.8		3	1.3	36.2	
Pneumonia/Influenza	41	4.9	14.8		9.8	20.8		E/1 1	7.1	24.9	
Chronic Obstructive Pulmonary Disease	3	33.3	12.5		33.3	21.3		3	3.3	26.2	
Transient Cerebral Ischemia	3	0.0	1.8		0.0	3.6		(0.0	5.9	
Stroke	25	24.0	18.7		28.0	24.1		2	8.0	27.5	
Hip Fracture	10	0.0	8.6		0.0	15.9		1	0.0	20.8	
Sepsis	4	0.0	9.7		0.0	12.1		(0.0	14.4	
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	8	0.0	9.2		0.0	17.8		1.	2.5	23.6	
Open Reduction of Hip Fracture	1	0.0	4.0		0.0	7.9			0.0	10.6	
Prostatectomy	6	0.0	0.7		0.0	1.6			0.0	2.8	
Cholecystectomy	6	0.0	0.6		0.0	1.1			0.0	1.6	
Hysterectomy	4	0.0	0.2		0.0	0.6			0.0	1.2	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MEMORIAL HOSPITAL Medicare Provider Number: 170105

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 77.9 years	Cancer
,	
Proportion female 60.3 %	Chronic cardiovascular disease 31.8 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.2 %
Referred by personal or HMO physician 46.7 %	Chronic renal disease 2.1 %
Transferred from skilled nursing facility 1.5 %	Chronic pulmonary disease 11.3 %
Admitted for elective procedure 37.1 %	Cerebrovascular degeneration 4.1 %
Admitted for emergency 2.1 %	Diabetes mellitus 6.2 9

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	91.7%	Hospital	6.3 Days
State	6.7%	State	7.3 Days
Outside State	1.6%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	90
PROFILE:	SPECIALTY SERVICES:
Total Beds44	Burn Unit No
Occupancy Rate 59.0 %	Cardlac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 43.2 %	Hospice Care No
Case Mix Index (CMI) 1.0033	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians14	Other Intensive Care No
Percent of Physicians Board Certified Specialists100.0 %	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/DrugNo
Registered Nurses	Rehabilitation No
Licensed Practical Nurses 5	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

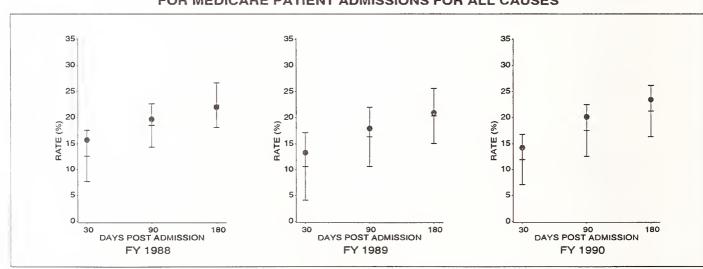
^{*} Not used in calculating mortality rates

MEMORIAL HOSPITAL
511 NE 10TH ST
ABILENE, KS 67410
Medicare Provider Number: 170114

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		30 DAYS		90 DAYS			180 DAYS		;	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	393	14.2	11.9	2.4	20.1	17.5	2.5	23.4	21.2	2.5
CONDITIONS:										
Acute Myocardial Infarction	9	0.0	23.4		0.0	26.4		0.0	29.4	
Congestive Heart Failure	29	10.3	16.2		20.7	25.0		24.1	31.1	
Pneumonia/Influenza	36	22.2	17.5		30.6	24.5	-1	33.3	28.7	
Chronic Obstructive Pulmonary Disease	4	0.0	7.0		25.0	14.1		25.0	20.0	
Transient Cerebral Ischemia	7	0.0	2.4		14.3	5.4		28.6	9.2	
Stroke	27	44.4	22.4		44.4	29.2		44.4	33.2	
Hip Fracture	1	0.0	7.4		0.0	13.8		0.0	19.3	
Sepsis	7	14.3	23.5		42.9	32.0		42.9	37.3	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	14	0.0	0.4		0.0	0.9		0.0	1.7	
Cholecystectomy	7	0.0	2.0		0.0	3.7		14.3	4.9	
Hysterectomy	1	0.0	0.0		0.0	0.1		0.0	0.1	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MEMORIAL HOSPITAL Medicare Provider Number: 170114

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	79.7 years	Cancer	6.9 %
Proportion female	57.8 %	Chronic cardiovascular disease	39.4 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.5 %
Referred by personal or HMO physician	49.1 %	Chronic renal disease	2.5 %
Transferred from skilled nursing facility	1.3 %	Chronic pulmonary disease	15.3 %
Admitted for elective procedure	8.1 %	Cerebrovascular degeneration	4.8 %
Admitted for emergency	31.0 %	Diabetes mellitus	2.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSIO	NI.	MEDICARE AVERAGE LENGTH OF STAY:	
ORIGIN OF MEDICARE PATIENT ADMISSIO	14:	MEDICANE AVERAGE LENGTH OF STAY:	
County/City	92.3%	Hospital	6.3 Days
State	6.0%	State	7.3 Days
Outside State	1.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds 52	Burn Unit No
Occupancy Rate 32.0 %	Cardiac Intensive Care Yes
Ownership/Control District/Authority	Comprehensive Geriatric No
Medicare Discharges 54.7 %	Hospice Care Yes
Case Mix Index (CMI) 1.0338	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 10	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
_	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug
	Rehabilitation No
Licensed Practical Nurses 2	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

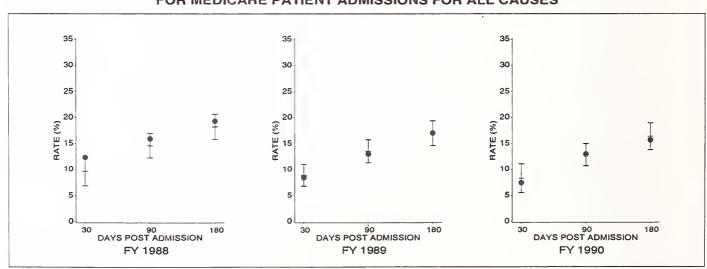
MERCY HOSPITAL

821 BURKE ST FORT SCOTT, KS 66701 Medicare Provider Number: 170058

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
			0 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1068	7.4	8.3	1.4	12.9	12.8	1.1	15.6	16.3	1.3
CONDITIONS:										
Acute Myocardial Infarction	23	34.8	29.5		39.1	32.5		39.1	35.2	
Congestive Heart Failure	63	14.3	15.8	4.8	20.6	24.2	6.5	25.4	30.8	7.9
Pneumonia/Influenza	65	13.8	13.7	7.6	23.1	18.9	5.6	24.6	22.6	5.3
Chronic Obstructive Pulmonary Disease	15	6.7	6.5		6.7	12.3		6.7	16.9	
Transient Cerebral Ischemia	16	0.0	1.7		6.3	3.6		6.3	5.8	
Stroke	36	19.4	21.5		27.8	28.5		33.3	32.9	
Hip Fracture	14	7.1	5.4		7.1	9.5		7.1	12.3	
Sepsis	12	25.0	26.4		33.3	35.8		41.7	41.2	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	6	16.7	1.2		16.7	2.4		16.7	3.7	
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	1	0.0	3.1		0.0	6.0		0.0	8.6	
Prostatectomy	112	0.0	0.6	1.3	2.7	1.6	1.5	3.6	2.8	1.7
Cholecystectomy	25	0.0	1.5		0.0	2.9		4.0	4.2	
Hysterectomy	12	0.0	0.2		0.0	0.6		0.0	1.1	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MERCY HOSPITAL Medicare Provider Number: 170058

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	77 0 years	Cancer	7.5 %
Proportion female	•		31.6 %
· ·	J2.7 /0	Chronic liver disease	
ADMISSION SOURCES/TYPES:			
Referred by personal or HMO physician	43.3 %	Chronic renal disease	
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	12.0 %
Admitted for elective procedure	25.7 %	Cerebrovascular degeneration	5.0 %
Admitted for emergency	53.7 %	Diabetes mellitus	7.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	57.1%	Hospital	6.1 Days
State	28.2%	State	7.3 Days
Outside State	14.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds 106	Burn Unit No
Occupancy Rate 52.0 %	Cardiac Intensive Care No
Ownership/ControlChurch	Comprehensive Geriatric No
Medicare Discharges 54.1 %	Hospice Care Yes
Case Mix Index (CMI) 1.0473	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns	Alcohol/DrugNo
riogistorou rearoos	Rehabilitation No
Licensed Practical Nurses 2	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

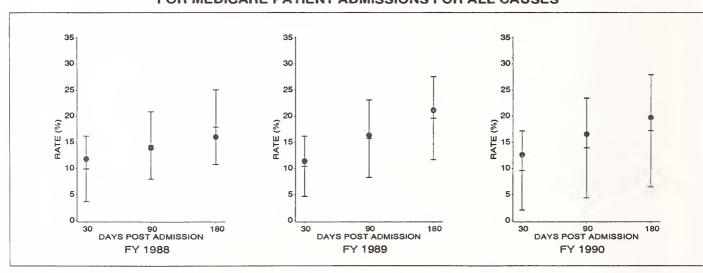
MERCY HOSPITAL INC

218 E PACK MOUNDRIDGE, KS 67107 Medicare Provider Number: 170075

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								**-		
		30 DAYS				90 DAYS				180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*		OBS	PRED	SD*	9	DBS	PRED	SD*
ALL CAUSES	127	12.6	9.6	3.8		16.5	13.9	4.8		19.7	17.2	5.4
CONDITIONS:												
Acute Myocardial Infarction	7	57.1	27.3			57.1	30.6	••••		57.1	34.0	
Congestive Heart Failure	8	50.0	24.8			62.5	35.2			32.5	41.4	
Pneumonia/Influenza	10	10.0	11.8			20.0	15.9		;	30.0	19.1	
Chronic Obstructive Pulmonary Disease	0											
Transient Cerebral Ischemia	2	0.0	0.8			0.0	2.0			0.0	3.4	
Stroke	9	44.4	19.1			44.4	25.0			44.4	29.0	
Hip Fracture	1	0.0	8.7			0.0	18.7			0.0	28.0	
Sepsis	0											
PROCEDURES:												
Angioplasty	0											
Coronary Artery Bypass Graft	0											
Initial Pacemaker Insertion	0											
Carotid Endarterectomy	0											
Hip Replacement/Reconstruction	0											
Open Reduction of Hip Fracture	0											
Prostatectomy	0											
Cholecystectomy	1	0.0	0.4			0.0	0.7			0.0	1.0	
Hysterectomy	0											

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MERCY HOSPITAL INC Medicare Provider Number: 170075

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 79.	.1 years	Cancer	3.1 %
Proportion female 67.	.7 %	Chronic cardiovascular disease	35.4 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician 52.	.8 %	Chronic renal disease	0.0 %
Transferred from skilled nursing facility 0.	.8 %	Chronic pulmonary disease	6.3 %
Admitted for elective procedure 26.	.8 %	Cerebrovascular degeneration	3.1 %
Admitted for emergency	.1 %	Diabetes mellitus	6.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	83.3%	Hospital	5.8 Days
State	16.7%	State	7.3 Days
Outside State	0.0%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 14.8 %	Cardiac Intensive Care No
Ownership/Control	Comprehensive Geriatric No
Medicare Discharges 66.7 %	Hospice Care No
Case Mix Index (CMI) 0.8375	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians2	Other Intensive Care No
Percent of Physicians Board Certified Specialists100.0 %	Trauma Center No
Medical Residents/Interns (Not Available)	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses (Not Available)	Alcohol/DrugNo
Licensed Practical Nurses(Not Available)	Rehabilitation No
Licensed Practical Nurses (Not Available)	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

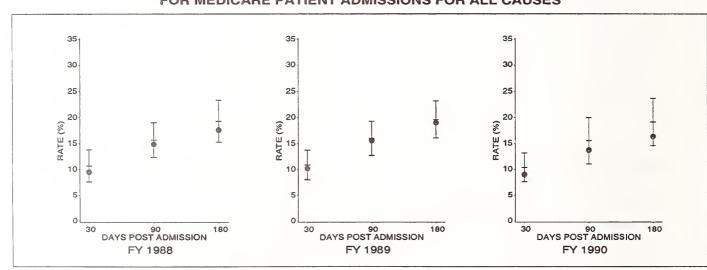
MERCY HOSPITAL INDEPENDENCE

800 W MYRTLE INDEPENDENCE, KS 67301 Medicare Provider Number: 170010

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
		30 DAYS			9	0 DAYS		18	180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	614	9.0	10.4	1.4	13.7	15.5	2.2	16.3	19.1	2.3	
CONDITIONS:											
Acute Myocardial Infarction	24	20.8	34.7		20.8	38.1		20.8	41.2		
Congestive Heart Failure	22	4.5	13.0		13.6	21.2		22.7	27.5		
Pneumonia/Influenza	52	13.5	14.4	6.4	19.2	19.8	6.6	19.2	23.7	7.4	
Chronic Obstructive Pulmonary Disease	11	0.0	5.2		9.1	9.3		9.1	13.3		
Transient Cerebral Ischemia	5	20.0	2.3		20.0	5.5		20.0	9.2		
Stroke	24	8.3	20.1		16.7	25.8		29.2	29.7		
Hip Fracture	31	9.7	6.2		12.9	10.9		16.1	14.0		
Sepsis	13	38.5	24.5		61.5	31.1		61.5	35.2		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initlal Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	14	0.0	3.1		0.0	6.4		0.0	9.2		
Open Reduction of Hip Fracture	10	20.0	6.4		20.0	10.7		30.0	13.6		
Prostatectomy	0										
Cholecystectomy	13	7.7	2.9		7.7	5.0		7.7	6.6		
Hysterectomy	8	0.0	0.4		0.0	0.9	••••	12.5	1.7		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MERCY HOSPITAL INDEPENDENCE Medicare Provider Number: 170010

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	77 8 vears	Cancer	5.9 %
Average age at aumission	11.0 years	Cancer	5.9 70
Proportion female	67.4 %	Chronic cardiovascular disease	38.1 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.6 %
Referred by personal or HMO physician	38.3 %	Chronic renal disease	2.3 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	17.3 %
Admitted for elective procedure	16.0 %	Cerebrovascular degeneration	1.5 %
Admitted for emergency	58.6 %	Diabetes mellitus	6.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	85.6%	Hospital	6.4 Days
State	11.0%	State	7.3 Days
Outside State	3.4%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE: Total Beds	SPECIALTY SERVICES: Burn Unit
Total Number of Physicians	Other Intensive Care

^{*} Not used in calculating mortality rates

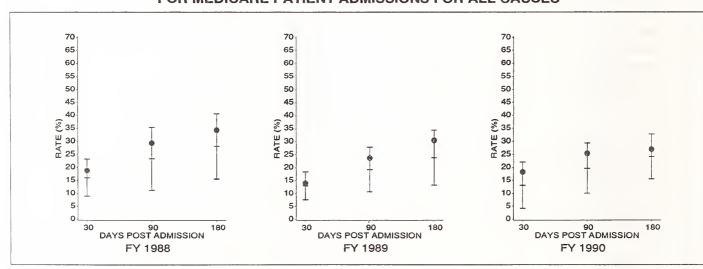
MIAMI COUNTY HOSPITAL

501 S HOSPITAL DR, BOX 365 PAOLA, KS 66071 Medicare Provider Number: 170109

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
			30 DAY	S	9	0 DAYS	5	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	198	18.2	13.0	4.5	25.3	19.6	4.8	26.8	24.1	4.3
CONDITIONS:										
Acute Myocardial Infarction	4	75.0	46.6		100.0	56.6		100.0	62.0	
Congestive Heart Failure	13	30.8	17.1		38.5	26.7		38.5	33.2	
Pneumonia/Influenza	51	23.5	16.1	7.6	35.3	21.8	11.4	35.3	25.8	11.1
Chronic Obstructive Pulmonary Disease	5	20.0	20.8		40.0	36.2		60.0	44.4	
Transient Cerebral Ischemia	4	25.0	6.6		25.0	14.0		50.0	20.8	
Stroke	4	50.0	26.9		75.0	37.1		75.0	43.7	
Hip Fracture	1	0.0	5.0		0.0	9.8		0.0	13.2	
Sepsis	3	66.7	24.0		66.7	34.5		100.0	41.6	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MIAMI COUNTY HOSPITAL Medicare Provider Number: 170109

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	0.1 years	Cancer	7.6 %
Proportion female 7	' 1.7 %	Chronic cardiovascular disease	50.5 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician 3	31.8 %	Chronic renal disease	1.5 %
Transferred from skilled nursing facility	1.0 %	Chronic pulmonary disease	21.7 %
Admitted for elective procedure	1.0 %	Cerebrovascular degeneration	7.6 %
Admitted for emergency	9.6 %	Diabetes mellitus	11.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	64.1%	Hospital	6.4 Days
State	30.6%	State	7.3 Days
Outside State	5.3%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	90
PROFILE:	SPECIALTY SERVICES:
Total Beds22	Burn Unit No
Occupancy Rate 36.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 58.2 %	Hospice Care No
Case Mix Index (CMI) 1.0153	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 7	Other Intensive Care No
Percent of Physicians Board Certified Specialists100.0 %	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug No
110910101011111111111111111111111111111	Rehabilitation No
Licensed Practical Nurses 4	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

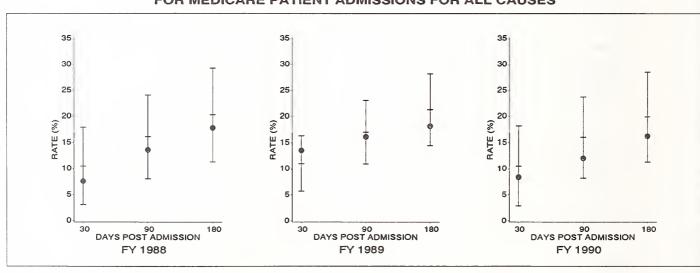
^{*} Not used in calculating mortality rates

MINNEOLA DISTRICT HOSPITAL 212 MAIN ST MINNEOLA, KS 67865 Medicare Provider Number: 170034

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)										
			30 DAY	S		9	0 DAYS	5	_	18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	_	DBS	PRED	SD*	0	вs	PRED	SD*
ALL CAUSES	167	8.4	10.5	3.8		12.0	16.0	3.9	1	6.2	19.9	4.3
CONDITIONS:												
Acute Myocardial Infarction	3	0.0	38.4			0.0	41.2			0.0	43.7	
Congestive Heart Failure	13	30.8	14.0		;	38.5	21.8		4	6.2	28.3	
Pneumonia/Influenza	16	12.5	19.8			12.5	27.2		1	2.5	31.4	
Chronic Obstructive Pulmonary Disease	0											
Transient Cerebral Ischemia	2	0.0	3.1			0.0	6.2			0.0	9.9	
Stroke	7	14.3	19.6			14.3	30.8		2	8.6	37.6	
Hip Fracture	1	0.0	2.7			0.0	5.6			0.0	7.8	
Sepsis	2	0.0	21.1			0.0	29.6			0.0	34.1	
PROCEDURES:												
Angioplasty	0											
Coronary Artery Bypass Graft	0											
Initial Pacemaker Insertion	0											
Carotid Endarterectomy	0											
Hip Replacement/Reconstruction	0											
Open Reduction of Hip Fracture	0											
Prostatectomy	3	0.0	1.5			0.0	3.5			0.0	5.6	
Cholecystectomy	1	0.0	0.4			0.0	0.8			0.0	1.2	
Hysterectomy	1	0.0	0.1			0.0	0.2			0.0	0.4	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MINNEOLA DISTRICT HOSPITAL

Medicare Provider Number: 170034

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	79.4 years	Cancer	2.4 %
Proportion female	58.1 %	Chronic cardiovascular disease	46.7 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.6 %
Referred by personal or HMO physician	46.1 %	Chronic renal disease	1.8 %
Transferred from skilled nursing facility	1.2 %	Chronic pulmonary disease	12.6 %
Admitted for elective procedure	6.0 %	Cerebrovascular degeneration	8.4 %
Admitted for emergency	12.0 %	Diabetes mellitus	6.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	50.4%	Hospital	7.3 Days
State	48.3%	State	7.3 Days
Dutside State	1.3%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	989
PROFILE:	SPECIALTY SERVICES:
Total Beds 15	Burn Unit No
Occupancy Rate 73.0 %	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Geriatric No
Medicare Discharges 66.1 %	Hospice Care No
Case Mix Index (CMI) 1.0273	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/DrugNo
Tiogram Training	RehabilitationNo
Licensed Practical Nurses 6	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

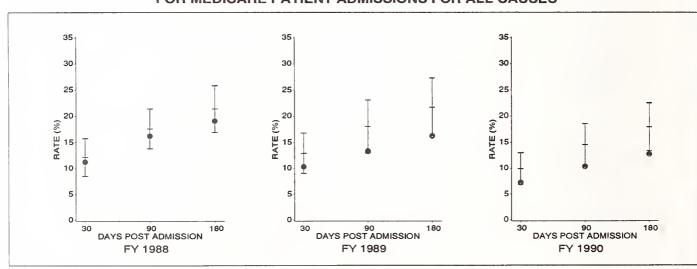
MITCHELL COUNTY HOSPITAL

400 W 8TH ST BELOIT, KS 67420 Medicare Provider Number: 170015

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		30 DAYS 90 DAYS		30 DAYS		18	0 DAYS	•		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	487	7.2	9.9	1.5	10.3	14.5	2.0	12.7	17.9	2.3
CONDITIONS:										
Acute Myocardial Infarction	11	54.5	30.2		54.5	33.4		54.5	36.2	
Congestive Heart Failure	27	7.4	15.3		11.1	24.0		11.1	30.4	
Pneumonia/Influenza	45	0.0	13.9		6.7	19.1		8.9	22.8	
Chronic Obstructive Pulmonary Disease	4	25.0	5.9		25.0	10.2		25.0	14.2	
Transient Cerebral Ischemia	7	0.0	1.9		0.0	4.6		0.0	7.6	
Stroke	24	16.7	20.6		25.0	26.6		33.3	30.5	
Hip Fracture	13	23.1	6.3		30.8	11.7		30.8	15.5	
Sepsis	8	0.0	23.9		12.5	31.1		25.0	36.0	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	6	16.7	6.1		16.7	11.8		16.7	15.7	
Open Reduction of Hip Fracture	4	25.0	6.7		50.0	12.9		50.0	17.1	
Prostatectomy	0									
Cholecystectomy	16	6.3	1.6		6.3	2.7		6.3	3.6	
Hysterectomy	3	0.0	1.8		0.0	4.1		0.0	6.4	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MITCHELL COUNTY HOSPITAL Medicare Provider Number: 170015

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	78.3 years	Cancer	4.1 %
Proportion female	63.4 %	Chronic cardiovascular disease	34.3 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.2 %
Referred by personal or HMO physician	36.6 %	Chronic renal disease	1.4 %
Transferred from skilled nursing facility	0.4 %	Chronic pulmonary disease	12.5 %
Admitted for elective procedure	5.7 %	Cerebrovascular degeneration	1.4 %
Admitted for emergency	12.3 %	Diabetes mellitus	5.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	61.8%	Hospital	6.4 Days
State	36.5%	State	7.3 Days
Outside State	1.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	90
PROFILE: Total Beds	SPECIALTY SERVICES: Burn Unit
STAFFING: Total Number of Physicians	Organ/Tissue Transplant

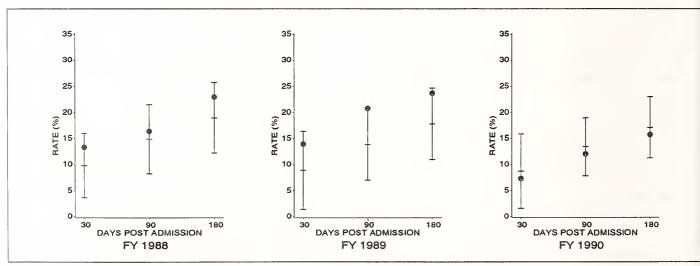
^{*} Not used in calculating mortality rates

MORRIS COUNTY HOSPITAL
600 N WASHINGTON ST
COUNCIL GROVE, KS 66846
Medicare Provider Number: 170070

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		3	0 DAY	s		90 DAY	3	18	0 DAYS	>
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	овя	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	191	7.3	8.7	3.6	12.0	13.4	2.8	15.7	17.1	3.0
CONDITIONS:										
Acute Myocardial Infarction	8	12.5	17.6		12.	5 19.9		25.0	22.1	
Congestive Heart Failure	13	15.4	17.3		23.	1 27.1		23.1	34.2	
Pneumonia/Influenza	17	5.9	12.9		17.0	18.0		23.5	21.8	
Chronic Obstructive Pulmonary Disease	3	0.0	6.6		0.0	10.8		0.0	14.5	
Transient Cerebral Ischemia	1	0.0	8.0		0.0	2.1		0.0	4.0	
Stroke	7	0.0	13.0		14.3	3 19.3		14.3	23.8	
Hip Fracture	1	0.0	4.7		0.0	10.0		0.0	14.0	
Sepsis	3	33.3	25.8		33.	3 38.4		66.7	44.7	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	2	0.0	0.4		0.0	1.1		0.0	2.1	
Cholecystectomy	1	0.0	1.3		0.0	3.1		0.0	4.8	
Hysterectomy	3	0.0	0.1		0.0	0.3		0.0	0.4	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MORRIS COUNTY HOSPITAL Medicare Provider Number: 170070

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	78.8 years	Cancer	7.3 %
Proportion female	51.3 %	Chronic cardiovascular disease	40.3 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.0 %
Referred by personal or HMO physician	51.3 %	Chronic renal disease	0.5 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	11.5 %
Admitted for elective procedure	95.8 %	Cerebrovascular degeneration	12.0 %
Admitted for emergency	0.0 %	Diabetes mellitus	5.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	75.9%	Hospital	5.6 Days
State	23.2%	State	7.3 Days
Outside State	0.9%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds 22	Burn Unit No
Occupancy Rate 31.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges(Not Available)	Hospice Care No
Case Mix Index (CMI) 0.9459	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians (Not Available)	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns(Not Available)	Alcohol/DrugNo
Registered Nurses(Not Available)	Rehabilitation No
Licensed Practical Nurses (Not Available)	Psychiatric No
** Except for CMI	Medicare Swing Beds No

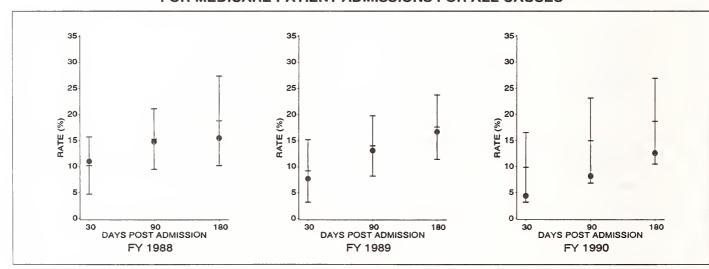
^{*} Not used in calculating mortality rates

MORTON COUNTY HOSPITAL 445 HILLTOP, BOX 937 ELKHART, KS 67950 Medicare Provider Number: 170166

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	182	4.4	9.9	3.3	8.2	15.0	4.1	12.6	18.7	4.1
CONDITIONS:										
Acute Myocardial Infarction	2	100.0	42.5		100.0	48.9		100.0	53.0	
Congestive Heart Failure	8	12.5	18.9		12.5	30.6		25.0	38.3	
Pneumonia/Influenza	27	3.7	15.0		7.4	21.5		7.4	25.3	
Chronic Obstructive Pulmonary Disease	3	0.0	12.7		0.0	21.1		0.0	27.1	
Transient Cerebral Ischemia	2	0.0	2.8		0.0	7.0		0.0	12.7	
Stroke	10	10.0	25.9		40.0	34.7		40.0	39.9	
Hip Fracture	0									
Sepsis	1	0.0	20.3		0.0	24.5		100.0	29.2	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	4	0.0	1.5		0.0	3.0		0.0	4.2	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MORTON COUNTY HOSPITAL Medicare Provider Number: 170166

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission 7	7.4 years	Cancer	4.4 %
Proportion female 5	4.9 %	Chronic cardiovascular disease	39.6 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.5 %
Referred by personal or HMO physician 3	7.9 %	Chronic renal disease	0.5 %
Transferred from skilled nursing facility	1.1 %	Chronic pulmonary disease	15.9 %
Admitted for elective procedure	8.2 %	Cerebrovascular degeneration	4.4 %
Admitted for emergency	6.0 %	Diabetes mellitus	9.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:	М	EDICARE AVERAGE LENGTH OF STAY:	
County/City5	66.6%	Hospital	6.4 Days
State	9.7%	State	7.3 Days
Outside State	33.7%	National	8.6 Days
Total 10	00.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 69.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 42.5 %	Hospice Care No
Case Mix Index (CMI) 1.0151	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 6	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug No
	Rehabilitation No
Licensed Practical Nurses	Psychiatric No
** Except for CMI	Medicare Swing BedsYes

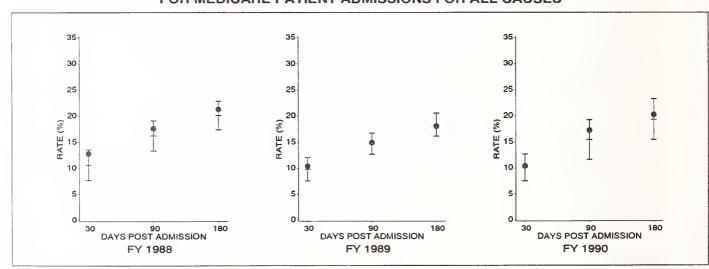
^{*} Not used in calculating mortality rates

MT CARMEL MEDICAL CENTER
CENTENNIAL & ROUSE STS
PITTSBURG, KS 66762
Medicare Provider Number: 170006

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
		3	0 DAY	S	9	0 DAYS	3	18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1245	10.4	10.1	1.3	17.2	15.4	1.9	20.2	19.3	2.0
CONDITIONS:										
Acute Myocardial Infarction	29	37.9	30.8		44.8	33.9		48.3	37.1	
Congestive Heart Failure	98	18.4	15.7	5.2	35.7	24.7	7.1	40.8	31.4	7.8
Pneumonia/Influenza	73	19.2	16.6	7.0	26.0	23.0	7.2	28.8	27.2	6.3
Chronic Obstructive Pulmonary Disease	28	7.1	8.0		10.7	12.9		10.7	16.6	
Transient Cerebral Ischemia	25	0.0	1.9		0.0	4.2		4.0	7.0	
Stroke	53	24.5	20.2	9.3	32.1	26.6	11.5	37.7	30.4	12.7
Hip Fracture	45	6.7	7.8		8.9	13.8		13.3	18.0	
Sepsis	7	28.6	23.1		28.6	32.4		28.6	38.4	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	11	9.1	6.2		18.2	10.4		18.2	13.3	
Carotid Endarterectomy	21	4.8	1.3		4.8	2.5		9.5	3.7	
Hip Replacement/Reconstruction	26	7.7	6.6		11.5	12.3		15.4	16.6	
Open Reduction of Hip Fracture	15	6.7	8.5		6.7	15.1		13.3	19.6	
Prostatectomy	40	0.0	1.1		5.0	2.7		12.5	4.7	
Cholecystectomy	27	0.0	5.8		3.7	10.4		3.7	12.9	
Hysterectomy	14	0.0	1.1		0.0	2.4		0.0	3.7	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



MT CARMEL MEDICAL CENTER Medicare Provider Number: 170006

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	77.7 years	Cancer	7.3 %
Proportion female	61.3 %	Chronic cardiovascular disease	32.0 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.8 %
Referred by personal or HMO physician	57.9 %	Chronic renal disease	1.2 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	11.6 %
Admitted for elective procedure	0.0 %	Cerebrovascular degeneration	6.7 %
Admitted for emergency	89.0 %	Diabetes mellitus	7.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

County/City	82.5%	Hospital	8.4 Days
tate	11.9%	State	7.3 Days
Outside State	5.6%	National	8.6 Days

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	90
PROFILE:	SPECIALTY SERVICES:
Total Beds 163	Burn Unit No
Occupancy Rate 51.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric Yes
Medicare Discharges 38.8 %	Hospice CareYes
Case Mix Index (CMI) 1.1750	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 26	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns (Not Available)	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses(Not Available)	Alcohol/DrugYes
Licensed Practical Nurses (Not Available)	Rehabilitation No
(Not Available)	Psychiatric Yes
** Except for CMI	Medicare Swing Beds Yes

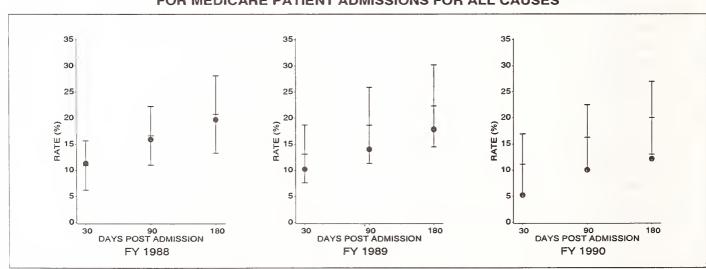
^{*} Not used in calculating mortality rates

NEMAHA VALLEY COMMUNITY HOSPITAL
1600 COMMUNITY DRIVE
SENECA, KS 66538
Medicare Provider Number: 170057

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
		3	0 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	231	5.2	11.1	2.9	10.0	16.2	3.1	12.1	20.0	3.5
CONDITIONS:										
Acute Myocardial Infarction	5	0.0	30.2		0.0	33.2		0.0	36.3	
Congestive Heart Failure	16	6.3	21.0		6.3	27.3		18.8	33.2	
Pneumonia/Influenza	14	0.0	13.8		14.3	18.6		21.4	21.5	
Chronic Obstructive Pulmonary Disease	3	0.0	5.6		0.0	13.0		0.0	20.3	
Transient Cerebral Ischemia	9	0.0	5.2		11.1	11.2		11.1	16.6	
Stroke	16	31.3	23.5		31.3	30.7		37.5	35.4	
Hip Fracture	0									
Sepsis	3	0.0	27.6		0.0	32.5		0.0	34.9	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	1	0.0	0.6		0.0	1.2		0.0	2.1	
Cholecystectomy	4	0.0	4.2		0.0	7.1	*****	0.0	8.8	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



NEMAHA VALLEY COMMUNITY HOSPITAL Medicare Provider Number: 170057

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	79.2 years	Cancer	6.9 %
Proportion female	56.3 %	Chronic cardiovascular disease	44.6 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	64.5 %	Chronic renal disease	1.3 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	12.1 %
Admitted for elective procedure	4.3 %	Cerebrovascular degeneration	1.3 %
Admitted for emergency	3.0 %	Diabetes mellitus	4.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	75.7%	Hospital	5.3 Days
State	21.1%	State	7.3 Days
Outside State	3.2%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 37.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 22.4 %	Hospice Care No
Case Mix Index (CMI) 1.0244	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Listing Tables Halls	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

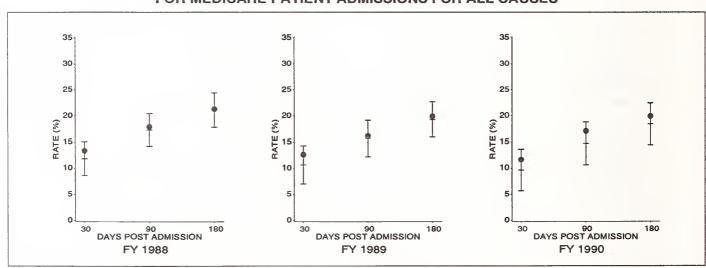
NEOSHO MEMORIAL HOSPITAL

629 S PLUMMER CHANUTE, KS 66720 Medicare Provider Number: 170143

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
		- 3	30 DAY	S	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD°	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	579	11.6	9.6	2.0	17.1	14.7	2.1	19.9	18.4	2.0
CONDITIONS:										
Acute Myocardial Infarction	16	37.5	25.1		43.8	28.1		43.8	31.4	
Congestive Heart Failure	29	24.1	15.8		37.9	24.9		41.4	31.5	
Pneumonia/Influenza	45	13.3	13.2		20.0	18.9		24.4	23.0	
Chronic Obstructive Pulmonary Disease	23	4.3	5.6		13.0	10.2		17.4	13.5	
Transient Cerebral Ischemia	9	0.0	3.5		0.0	8.1		0.0	13.8	
Stroke	30	20.0	18.1		30.0	23.9		33.3	28.0	
Hip Fracture	17	5.9	5.5		11.8	9.7		17.6	12.8	
Sepsis	10	10.0	20.4		20.0	30.0		20.0	35.2	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	1	0.0	3.5		0.0	7.5		0.0	11.4	
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	10	10.0	2.0		10.0	4.0		10.0	5.5	
Open Reduction of Hip Fracture	11	0.0	4.8		9.1	8.3		18.2	11.3	
Prostatectomy	6	0.0	0.4		0.0	1.0		0.0	1.8	
Cholecystectomy	11	18.2	2.5		18.2	5.3		18.2	7.8	
Hysterectomy	4	25.0	2.2		25.0	4.4		50.0	6.6	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



NEOSHO MEMORIAL HOSPITAL Medicare Provider Number: 170143

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	76.3 years	Cancer	7.9 %
Proportion female	59.2 %	Chronic cardiovascular disease	33.9 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.5 %
Referred by personal or HMO physician	62.9 %	Chronic renal disease	2.1 %
Transferred from skilled nursing facility	0.9 %	Chronic pulmonary disease	16.6 %
Admitted for elective procedure	12.4 %	Cerebrovascular degeneration	5.2 %
Admitted for emergency	0.3 %	Diabetes mellitus	6.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	70.4%	Hospital	5.6 Days
State	26.8%	State	7.3 Days
Outside State	2.8%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds 60	Burn Unit No
Occupancy Rate 58.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Gerlatric No
Medicare Discharges 42.8 %	Hospice Care No
Case Mix Index (CMI) 1.1248	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	Rehabilitation No
Licensed Fractical Nurses	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

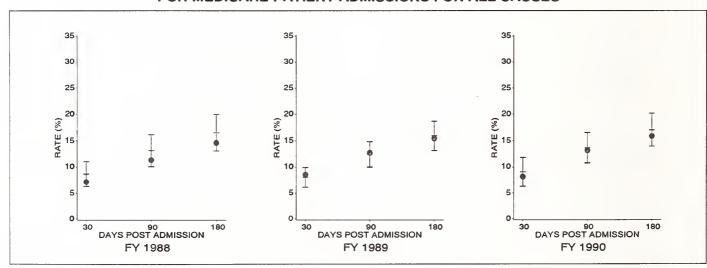
NEWMAN MEMORIAL COUNTY HOSPITAL

12TH & CHESTNUT STS
EMPORIA, KS 66801
Medicare Provider Number: 170001

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
			30 DAY	S	9	0 DAYS		18	0 DAYS	>	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	1009	8.1	9.0	1.4	13.1	13.6	1.5	15.8	17.0	1.6	
CONDITIONS:											
Acute Myocardial Infarction	44	18.2	33.6		29.5	36.9		31.8	40.0		
Congestive Heart Failure	63	14.3	16.0	4.9	27.0	25.7	6.2	33.3	32.4	6.0	
Pneumonia/Influenza	86	14.0	16.2	5.0	20.9	22.4	4.6	24.4	26.7	5.3	
Chronic Obstructive Pulmonary Disease	6	16.7	10.2		33.3	16.4		33.3	20.8		
Transient Cerebral Ischemia	8	0.0	1.3		0.0	2.9		0.0	4.7	****	
Stroke	39	20.5	21.5		30.8	27.5		38.5	31.4		
Hip Fracture	50	4.0	6.7		8.0	12.1		8.0	16.0		
Sepsis	6	16.7	26.4		16.7	34.1		16.7	38.1		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	8	0.0	4.1		0.0	6.4		0.0	8.6		
Carotid Endarterectomy	4	0.0	2.0		0.0	3.3		0.0	4.7		
Hip Replacement/Reconstruction	35	0.0	3.7		5.7	6.8		5.7	9.1		
Open Reduction of Hip Fracture	25	4.0	6.2		4.0	11.7		4.0	15.7		
Prostatectomy	48	2.1	0.7		2.1	1.8		8.3	3.1		
Cholecystectomy	18	5.6	1.6		11.1	3.1		11.1	4.3		
Hysterectomy	7	0.0	0.1	••••	0.0	0.2		0.0	0.3		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



NEWMAN MEMORIAL COUNTY HOSPITAL Medicare Provider Number: 170001

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	77.2 years	Cancer	6.6 %
Proportion female	54.8 %	Chronic cardiovascular disease	28.8 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.8 %
Referred by personal or HMO physician	65.2 %	Chronic renal disease	1.5 %
Transferred from skilled nursing facility	0.4 %	Chronic pulmonary disease	16.6 %
Admitted for elective procedure	14.9 %	Cerebrovascular degeneration	6.0 %
Admitted for emergency	42.2 %	Diabetes mellitus	4.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	57.9%	Hospital	7.9 Days
State	39.7%	State	7.3 Days
Outside State	2.4%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 49.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 45.9 %	Hospice Care No
Case Mix Index (CMI) 1.1868	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0 Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses 27	Rehabilitation No
Licensed Fractical Nuises	Psychiatric Yes
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

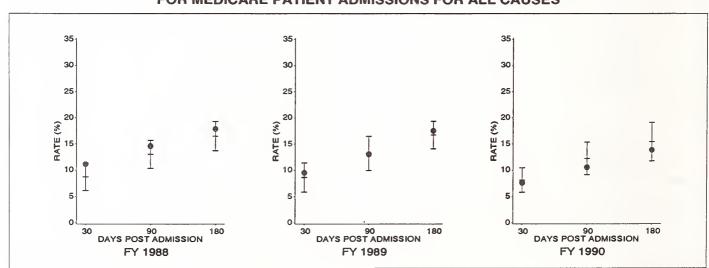
NEWTON MEDICAL CENTER

411 SE 2ND, BOX 308 NEWTON, KS 67114 Medicare Provider Number: 170103

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		- ;	30 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1011	7.6	8.1	1.2	10.5	12.2	1.6	13.8	15.4	1.8
CONDITIONS:										
Acute Myocardial Infarction	31	19.4	28.5		22.6	32.1		22.6	34.9	
Congestive Heart Failure	36	22.2	17.2		27.8	2 6.3		36.1	32.6	
Pneumonia/Influenza	63	20.6	14.7	7.9	20.6	20.4	6.8	25.4	24.2	6.2
Chronic Obstructive Pulmonary Disease	5	0.0	10.7		0.0	20.1		20.0	26.3	
Transient Cerebral Ischemia	21	0.0	2.5		9.5	5.9		9.5	10.0	
Stroke	51	13.7	18.2	10.1	19.6	25.5	9.7	23.5	29.7	9.3
Hip Fracture	54	5.6	5.9	3.2	9.3	10.8	4.4	13.0	14.3	5.3
Sepsis	15	6.7	23.2		6.7	27.9		13.3	32.5	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initiai Pacemaker Insertion	11	0.0	3.8		0.0	7.9		9.1	11.9	
Carotid Endarterectomy	1	0.0	2.5		0.0	4.8		0.0	6.6	
Hip Replacement/Reconstruction	42	2.4	2.9		4.8	5.5		4.8	7.5	
Open Reduction of Hip Fracture	21	4.8	6.0		9.5	11.3		9.5	15.3	
Prostatectomy	90	1.1	0.9	1.0	1.1	2.1	1.6	1.1	3.6	2.2
Cholecystectomy	17	0.0	3.1		0.0	6.2		0.0	8.5	
Hysterectomy	12	0.0	0.5		0.0	1.2		0.0	2.0	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



NEWTON MEDICAL CENTER Medicare Provider Number: 170103

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	77.7 years	Cancer	5.8 %
Proportion female	57.3 %	Chronic cardiovascular disease	36.8 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.5 %
Referred by personal or HMO physician	45.6 %	Chronic renal disease	1.7 %
Transferred from skilled nursing facility	0.4 %	Chronic pulmonary disease	12.1 %
Admitted for elective procedure	1.0 %	Cerebrovascular degeneration	6.2 %
Admitted for emergency	3.0 %	Diabetes mellitus	5.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	V:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	64.4%	Hospital	6.9 Days
State	33.2%	State	7.3 Days
Dutside State	2.4%	National	8.6 Days
Fotal	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	90
PROFILE:	SPECIALTY SERVICES:
Total Beds 84	Burn Unit No
Occupancy Rate 60.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric Yes
Medicare Discharges 48.5 %	Hospice Care No
Case Mix Index (CMI) 1.1662	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns 0	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
in out out of the first the same of the sa	Alcohol/Drug No
	Rehabilitation No
Licensed Practical Nurses 12	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

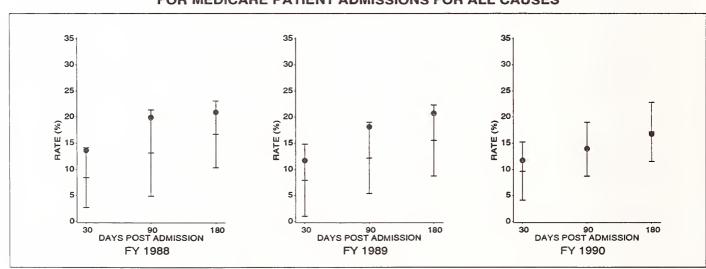
NORTHWEST KANSAS REGIONAL MEDICAL CENTER 1ST AND SHERMAN STS GOODLAND, KS 67735 Medicare Provider Number: 170097

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

NUMBER	3	0 DAY							
		DAT	S	9	0 DAYS	3	18	0 DAYS	,
NUMBER OF CASES	OBS	PRED	SD°	OBS	PRED	SD*	OBS	PRED	SD*
180	11.7	9.6	2.8	13.9	13.8	2.6	16.7	17.1	2.8
6	50.0	30.1		50.0	33.5		50.0	36.7	
9	0.0	21.2		11.1	32.9		22.2	41.4	
24	20.8	14.8		20.8	19.8		20.8	22.9	
3	33.3	7.2		33.3	12.0		33.3	16.1	
4	0.0	1.5		0.0	3.5		0.0	6.1	
9	11.1	19.7		22.2	22.9		33.3	25.9	
2	0.0	7.3		0.0	12.6		0.0	16.3	
0									
0									
0									
0									
0									
0									
0									
0									
2	0.0	1.1		0.0	1.9		0.0	2.7	
0									
	6 9 24 3 4 9 2 0	6 50.0 9 0.0 24 20.8 3 33.3 4 0.0 9 11.1 2 0.0 0 0 0 0 0 0 0	6 50.0 30.1 9 0.0 21.2 24 20.8 14.8 3 33.3 7.2 4 0.0 1.5 9 11.1 19.7 2 0.0 7.3 0 0 0 0 0 0 0 0 0 0 0 0 0	6 50.0 30.1 9 0.0 21.2 24 20.8 14.8 3 33.3 7.2 4 0.0 1.5 9 11.1 19.7 2 0.0 7.3 0 0 0 0 0 0 0 0 2 0.0 1.1	6 50.0 30.1 50.0 9 0.0 21.2 11.1 24 20.8 14.8 33.3 4 0.0 1.5 0.0 9 11.1 19.7 22.2 2 0.0 7.3 0.0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	6 50.0 30.1 50.0 33.5 9 0.0 21.2 11.1 32.9 24 20.8 14.8 20.8 19.8 3 33.3 7.2 33.3 12.0 4 0.0 1.5 0.0 3.5 9 11.1 19.7 22.2 22.9 2 0.0 7.3 0.0 12.6 0	6 50.0 30.1 50.0 33.5 9 0.0 21.2 11.1 32.9 24 20.8 14.8 33.3 12.0 4 0.0 1.5 0.0 3.5 9 11.1 19.7 22.2 22.9 2 0.0 7.3 0.0 12.6 0	6 50.0 30.1 50.0 33.5 50.0 9 0.0 21.2 11.1 32.9 22.2 24 20.8 14.8 20.8 19.8 33.3 12.0 33.3 4 0.0 1.5 0.0 3.5 0.0 9 11.1 19.7 22.2 22.9 33.3 2 0.0 7.3 0.0 12.6 0.0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	6 50.0 30.1 50.0 33.5 50.0 36.7 9 0.0 21.2 11.1 32.9 22.2 41.4 24 20.8 14.8 20.8 19.8 33.3 16.1 4 0.0 1.5 0.0 3.5 0.0 6.1 9 11.1 19.7 22.2 22.9 33.3 25.9 2 0.0 7.3 0.0 12.6 0.0 16.3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (*2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NORTHWEST KANSAS REGIONAL MEDICAL CENTER Medicare Provider Number: 170097

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	76.9 years	Cancer	2.2 %
Proportion female	55.0 %	Chronic cardiovascular disease	57.2 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.7 %
Referred by personal or HMO physician	78.9 %	Chronic renal disease	3.9 %
Transferred from skilled nursing facility	1.1 %	Chronic pulmonary disease	15.6 %
Admitted for elective procedure	1.1 %	Cerebrovascular degeneration	1.1 %
Admitted for emergency	32.8 %	Diabetes mellitus	7.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	V:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	85.6%	Hospital	4.9 Days
State	11.5%	State	7.3 Days
Outside State	2.9%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE: Total Beds	SPECIALTY SERVICES: Burn Unit No Cardiac Intensive Care No Comprehensive Gerlatric Yes Hospice Care No Medical/Surgical Intensive Care No Organ/Tissue Transplant No Other Intensive Care No Trauma Center No OTHER SPECIALTY/HOSPITAL-BASED SERVICES: Alcohol/Drug No
Licensed Practical Nurses9	Rehabilitation
** Except for CMI	Modicale Swilly Deus 198

^{*} Not used in calculating mortality rates

NORTON COUNTY HOSPITAL

102 E HOLME

NORTON, KS 67654

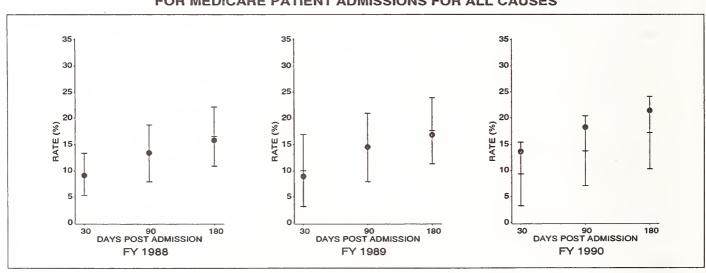
Medicare Provider Number: 170084

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		- 3	30 DAY	S	9	0 DAYS	3	18	0 DAYS	•
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	220	13.6	9.3	3.0	18.2	13.7	3.3	21.4	17.2	3.5
CONDITIONS:										
Acute Myocardial Infarction	11	45.5	28.6		45.5	31.7		45.5	35.1	
Congestive Heart Failure	17	11.8	14.8		29.4	22.9		35.3	28.8	
Pneumonia/Influenza	31	22.6	15.3		32.3	20.9		32.3	24.7	
Chronic Obstructive Pulmonary Disease	6	33.3	6.0		33.3	10.9		33.3	15.5	
Transient Cerebral Ischemia	2	0.0	2.5		0.0	5.8		50.0	9.3	
Stroke	10	10.0	14.4		10.0	17.7		20.0	20.5	
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	2	0.0	0.3		0.0	0.6		0.0	1.1	
Cholecystectomy	0									
Hysterectomy	5	0.0	0.4		0.0	1.0		0.0	1.7	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NORTON COUNTY HOSPITAL Medicare Provider Number: 170084

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	79.2 years	Cancer	6.8 %
Proportion female	•	Chronic cardiovascular disease	36.4 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.9 %
Referred by personal or HMO physician	96.4 %	Chronic renal disease	0.5 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	7.7 %
Admitted for elective procedure	10.0 %	Cerebrovascular degeneration	2.3 %
Admitted for emergency	0.5 %	Diabetes mellitus	2.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	78.1%	Hospital	5.4 Days
State	14.3%	State	7.3 Days
Outside State	7.6%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 27.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 40.8 %	Hospice Care No
Case Mix Index (CMI) 1.0251	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0 Registered Nurses	Alcohol/Drug No
Tiogloto: ou Traigos IIII	Rehabilitation No
Licensed Practical Nurses 10	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

OLATHE COMMUNITY HOSPITAL

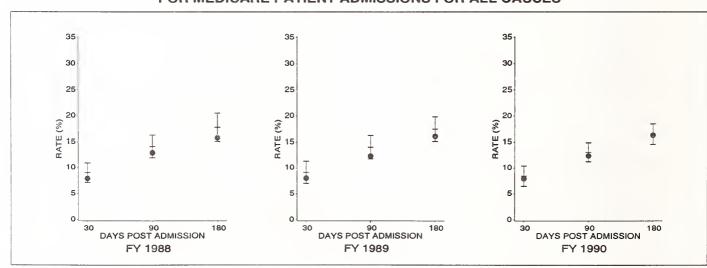
300 S ROGERS RD OLATHE, KS 66061 Medicare Provider Number: 170049

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
_		3	0 DAY	S	9	90 DAYS			180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	1660	7.9	8.4	1.0	12.3	13.0	0.9	16.3	16.5	1.0	
CONDITIONS:											
Acute Myocardial Infarction	38	34.2	27.6		36.8	31.0		39.5	33.9		
Congestive Heart Failure	57	17.5	13.2	7.4	24.6	21.1	8.8	29.8	27.0	10.9	
Pneumonia/Influenza	84	14.3	14.8	3.9	20.2	20.5	4.9	25.0	24.5	5.4	
Chronic Obstructive Pulmonary Disease	24	0.0	8.2		12.5	15.0		25.0	20.4		
Transient Cerebral Ischemia	35	0.0	2.4		2.9	5.7		8.6	9.2		
Stroke	46	21.7	22.8		21.7	28.4		30.4	32.1		
Hip Fracture	64	6.3	7.6	3.4	9.4	13.0	4.7	14.1	16.7	5.9	
Sepsis	26	15.4	24.8		26.9	32.4		34.6	38.1		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	9	0.0	3.6		11.1	7.1		11.1	10.2		
Carotid Endarterectomy	14	0.0	3.2		0.0	5.9		7.1	8.4		
Hip Replacement/Reconstruction	60	3.3	3.9	2.6	3.3	7.2	4.3	6.7	9.7	5.5	
Open Reduction of Hip Fracture	26	7.7	7.3		11.5	12.7		15.4	16.3		
Prostatectomy	55	0.0	0.8	1.8	3.6	1.9	2.5	7.3	3.3	4.2	
Cholecystectomy	34	5.9	2.2		8.8	3.8		11.8	4.9		
Hysterectomy	10	0.0	1.6		0.0	3.8		0.0	5.8		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (*2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



OLATHE COMMUNITY HOSPITAL Medicare Provider Number: 170049

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	76.1 years	Cancer	6.3 %
Proportion female	60.6 %	Chronic cardiovascular disease	39.1 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.2 %
Referred by personal or HMO physician	33.1 %	Chronic renal disease	2.6 %
Transferred from skilled nursing facility	1.3 %	Chronic pulmonary disease	20.3 %
Admitted for elective procedure	12.9 %	Cerebrovascular degeneration	6.1 %
Admitted for emergency	2.1 %	Diabetes mellitus	6.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	56.9%	Hospital	6.9 Days
State	35.3%	State	7.3 Days
Outside State	7.8%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitais** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds 130	Burn Unit No
Occupancy Rate 67.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 40.8 %	Hospice CareYes
Case Mix Index (CMI) 1.2663	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 105	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses	Alcohol/Drug No
Licensed Practical Nurses	RehabilitationNo
Licensed Practical Nurses	Psychiatric No
** Except for CMI	Medicare Swing Beds No

^{*} Not used in calculating mortality rates

OSBORNE COUNTY MEMORIAL HOSPITAL

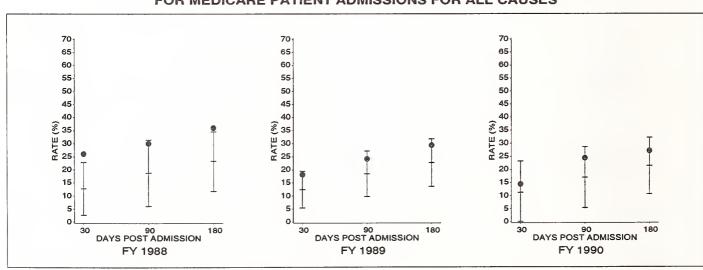
424 W NEW HAMPSHIRE ST OSBORNE, KS 67473 Medicare Provider Number: 170041

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				МС	ORTALIT	Y RATE	S (%)			
		3	0 DAY	S	9	0 DAYS	3	18	0 DAYS	,
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	111	14.4	11.3	5.9	24.3	16.9	5.8	27.0	21.3	5.4
CONDITIONS:										
Acute Myocardial Infarction	4	50.0	30.0		50.0	34.2		50.0	38.6	
Congestive Heart Failure	14	14.3	16.6		21.4	25.3		35.7	31.9	
Pneumonia/Influenza	14	21.4	15.9		35.7	21.7		35.7	25.7	
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	0									
Stroke	4	25.0	17.1		25.0	24.0		25.0	28.0	
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



OSBORNE COUNTY MEMORIAL HOSPITAL

Medicare Provider Number: 170041

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Augusta and adminator	01 E	Connect	700
Average age at admission	or.5 years	Cancer	7.2 %
Proportion female	62.2 %	Chronic cardiovascular disease	41.4 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.9 %
Referred by personal or HMO physician	86.5 %	Chronic renal disease	1.8 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	10.8 %
Admitted for elective procedure	0.0 %	Cerebrovascular degeneration	1.8 %
Admitted for emergency	0.9 %	Diabetes mellitus	7.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

MEDICARE AVERAGE LENGTH OF STAY:	
Hospital	3.2 Days
State	7.3 Days
National	8.6 Days
	Hospital State National

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	989
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 27.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 81.4 %	Hospice Care No
Case Mix Index (CMI) 0.9622	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns	Alcohol/DrugNo
Registered Nurses 8	Rehabilitation No
Licensed Practical Nurses	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

OSWEGO MEMORIAL HOSPITAL

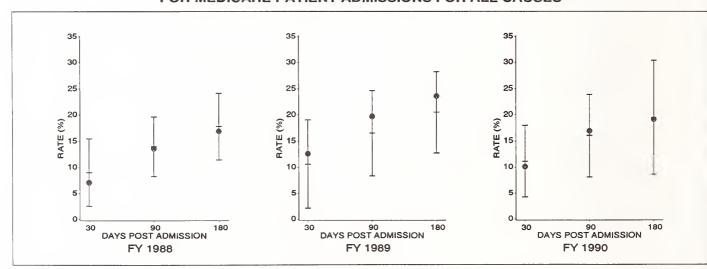
900 BARKER DRIVE OSWEGO, KS 67356 Medicare Provider Number: 170159

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)										
		3	0 DAY	S	9	0 DAYS	3	1:	80 DAYS	3	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	ОВЯ	PRED	SD*	
ALL CAUSES	89	10.1	11.1	3.4	16.9	16.0	3.9	19.1	19.5	5.4	
CONDITIONS:											
Acute Myocardial Infarction	2	50.0	23.8		50.0	26.4		50.0	29.9		
Congestive Heart Failure	4	25.0	29.9		25.0	40.5		25.0	45.3		
Pneumonia/Influenza	19	10.5	16.8		21.1	23.4		21.1	27.4		
Chronic Obstructive Pulmonary Disease	1	0.0	5.7		0.0	11.7		0.0	16.2		
Transient Cerebral Ischemia	0										
Stroke	7	28.6	20.8		28.6	28.0		28.6	33.3		
Hip Fracture	0										
Sepsis	1	0.0	19.3		0.0	26.9		0.0	31.4		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	0										
Open Reduction of Hip Fracture	0										
Prostatectomy	2	0.0	3.0		0.0	5.7		0.0	9.8		
Cholecystectomy	0										
Hysterectomy	1	0.0	0.4		0.0	1.0		0.0	0 1.7		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (*2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



OSWEGO MEMORIAL HOSPITAL Medicare Provider Number: 170159

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

EMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	80.1 years	Cancer	2.2 %
Proportion female	67.4 %	Chronic cardiovascular disease	21.3 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	23.6 %	Chronic renal disease	1.1 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	16.9 %
Admitted for elective procedure	0.0 %	Cerebrovascular degeneration	9.0 %
Admitted for emergency	0.0 %	Diabetes mellitus	7.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	86.0%	Hospital	5.5 Days
State	8.4%	State	7.3 Days
Outside State	5.6%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 27.0 %	Cardiac Intensive Care No
Ownership/Control Private, For Profit	Comprehensive Geriatric No
Medicare Discharges(Not Available)	Hospice Care No
Case Mix Index (CMI) 0.9831	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 10	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
·	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
modeat (100)dot (to) (110)	Alcohol/Drug No
Registered Nurses	Rehabilitation No
Licensed Practical Nurses	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

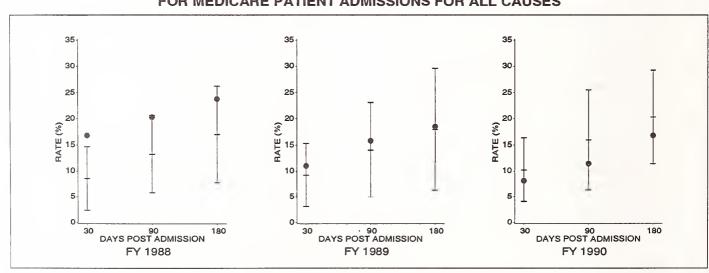
OTTAWA COUNTY HOSPITAL
215 EAST EIGHTH
MINNEAPOLIS, KS 67467
Medicare Provider Number: 170126

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALI					RTALITY RATES (%)					
			30 DAY	s	9	0 DAYS	3	18	180 DAYS			
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*		
ALL CAUSES	149	8.1	10.2	3.1	11.4	15.9	4.8	16.8	20.3	4.5		
CONDITIONS:												
Acute Myocardial Infarction	9	11.1	24.5		11.1	27.7		11.1	31.4			
Congestive Heart Failure	5	0.0	15.6		0.0	24.4		0.0	30.1			
Pneumonia/Influenza	16	6.3	13.7		12.5	19.1		18.8	22.6			
Chronic Obstructive Pulmonary Disease	2	0.0	5.9		0.0	12.4		0.0	18.6			
Transient Cerebral Ischemia	0											
Stroke	11	36.4	16.6		36.4	26.0		36.4	31.3			
Hip Fracture	1	0.0	14.7		0.0	26.9		100.0	32.9			
Sepsis	2	0.0	10.4		0.0	13.7		0.0	16.9			
PROCEDURES:												
Angioplasty	0											
Coronary Artery Bypass Graft	0											
Initial Pacemaker Insertion	0											
Carotid Endarterectomy	0											
Hip Replacement/Reconstruction	0											
Open Reduction of Hip Fracture	0											
Prostatectomy	0								+			
Cholecystectomy	0											
Hysterectomy	0											

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (* 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



OTTAWA COUNTY HOSPITAL Medicare Provider Number: 170126

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 80.2 years	Cancer 6.7 %
Proportion female	Chronic cardiovascular disease 49.7 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.0 %
Referred by personal or HMO physician 51.0 %	Chronic renal disease 2.7 %
Transferred from skilled nursing facility 3.4 %	Chronic pulmonary disease 14.8 %
Admitted for elective procedure 98.7 %	Cerebrovascular degeneration 8.7 %
Admitted for emergency 0.0 %	Diabetes mellitus 3.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

	ORIGIN OF MEDICARE PATIENT ADMISSION	٠	MEDICARE AVERAGE LENGTH OF STAY:	
				5 7 Dove
١	County/City	75.4%	Hospital	5.7 Days
1	State	24.2%	State	7.3 Days
	Outside State	0.4%	National	8.6 Days
	Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 88.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 72.4 %	Hospice Care No
Case Mix Index (CMi) 0.9974	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns (Not Available)	Alcohol/DrugNo
Registered Nurses(Not Available)	Rehabilitation No
Licensed Practical Nurses (Not Available)	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

PHILLIPS COUNTY HOSPITAL

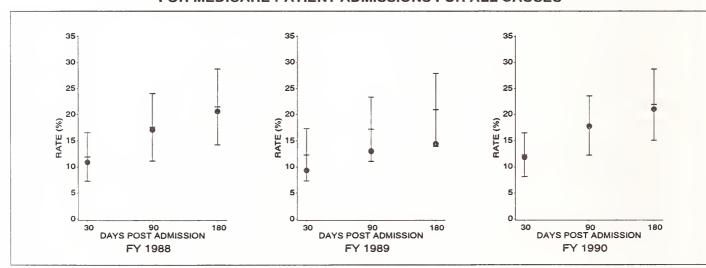
1150 STATE ST PHILLIPSBURG, KS 67661 Medicare Provider Number: 170061

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
			30 DAY	S	9	0 DAYS	>	18	0 DAYS	>
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	271	11.8	12.3	2.1	17.7	17.9	2.8	21.0	21.9	3.4
CONDITIONS:										
Acute Myocardial Infarction	12	16.7	25.1		16.7	27.8		16.7	30.2	
Congestive Heart Failure	22	4.5	14.0		13.6	21.6		22.7	28.1	
Pneumonia/Influenza	34	29.4	19.2		29.4	26.0		35.3	30.2	
Chronic Obstructive Pulmonary Disease	6	0.0	9.4		0.0	16.0		0.0	21.1	
Transient Cerebral Ischemia	8	0.0	1.2		0.0	2.9		0.0	4.9	
Stroke	6	16.7	23.7		33.3	30.3		33.3	34.7	
Hip Fracture	1	100.0	4.8		100.0	7.6		100.0	9.2	
Sepsis	6	33.3	37.4		33.3	44.1		33.3	48.7	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	5	0.0	4.7		40.0	9.6		60.0	13.8	
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	1	100.0	4.5	*****	100.0	7.3		100.0	9.0	
Open Reduction of Hip Fracture	0									
Prostatectomy	1	0.0	0.2		0.0	0.4		0.0	0.6	,
Cholecystectomy	1	0.0	0.7		0.0	1.1		0.0	1.5	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PHILLIPS COUNTY HOSPITAL Medicare Provider Number: 170061

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 78.9 years	Cancer 4.4 %
Proportion female 62.7 %	Chronic cardiovascular disease 35.1 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.4 %
Referred by personal or HMO physician 21.8 %	Chronic renal disease 2.2 %
Transferred from skilled nursing facility 1.5 %	Chronic pulmonary disease 9.6 %
Admitted for elective procedure 4.8 %	Cerebrovascular degeneration 4.1 %
Admitted for emergency 74.5 %	Diabetes mellitus 10.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISS	ION:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	80.9%	Hospital	5.2 Days
State	14.4%	State	7.3 Days
Outside State	4.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	9 90
PROFILE:	SPECIALTY SERVICES:
Total Beds 62	Burn Unit No
Occupancy Rate 72.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 60.8 %	Hospice Care No
Case Mix Index (CMI) 1.0317	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
· ·	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns0	Alcohol/Drug No
Registered Nurses	Rehabilitation No
Licensed Practical Nurses 4	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

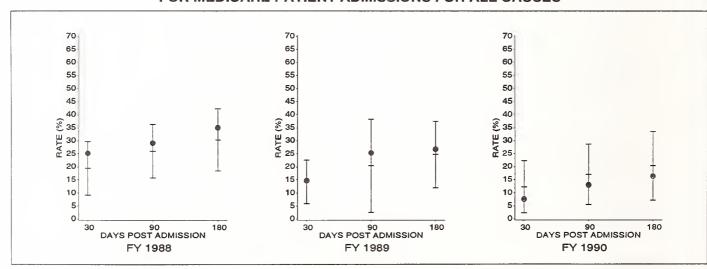
PLAINVILLE RURAL HOSPITAL
304 S COLORADO ST
PLAINVILLE, KS 67663
Medicare Provider Number: 170092

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		- 3	0 DAY	S	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	92	7.6	12.3	5.0	13.0	17.0	5.8	16.3	20.3	6.6
CONDITIONS:										
Acute Myocardial Infarction	4	50.0	25.6		50.0	28.1		50.0	30.4	
Congestive Heart Failure	7	28.6	16.0		42.9	24.1		57.1	29.3	
Pneumonia/Influenza	10	10.0	23.4		30.0	31.6		40.0	37.0	
Chronic Obstructive Pulmonary Disease	1	0.0	7.2		0.0	12.2		100.0	15.6	
Transient Cerebral Ischemia	1	0.0	0.9		0.0	2.2		0.0	3.7	
Stroke	6	0.0	26.5		16.7	32.5		16.7	36.1	
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases Is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PLAINVILLE RURAL HOSPITAL Medicare Provider Number: 170092

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:
Average age at admission 79.2 years	Cancer 2.2 %
Proportion female 63.0 %	Chronic cardiovascular disease 51.1 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.0 %
Referred by personal or HMO physician 41.3 %	Chronic renal disease 5.4 %
Transferred from skilled nursing facility 0.0 %	Chronic pulmonary disease 15.2 %
Admitted for elective procedure 8.7 %	Cerebrovascular degeneration 1.1 %
Admitted for emergency 69.6 %	Diabetes mellitus 3.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:	:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	86.0%	Hospital	5.0 Days
State	13.3%	State	7.3 Days
Outside State	0.7%	National	8.6 Days
Total 1	00.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 18.0 %	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Geriatric No
Medicare Discharges 47.0 %	Hospice Care No
Case Mix Index (CMI) 0.8458	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/Drug No
Registered Nurses	Rehabilitation No
Licensed Practical Nurses 7	Psychiatric No
** Except for CMI	Medicare Swing BedsYes

^{*} Not used in calculating mortality rates

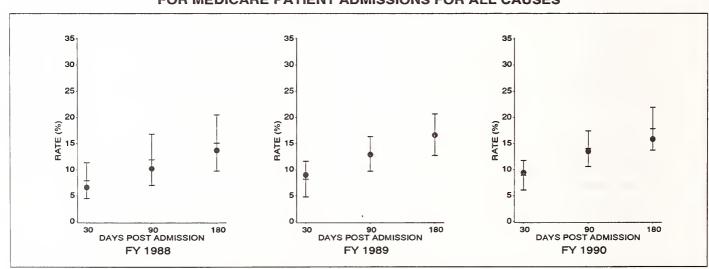
PRATT REGIONAL MEDICAL CENTER
200 COMMODORE
PRATT, KS 67124
Medicare Provider Number: 170027

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
			30 DAY	S	90 DAYS			18	180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	437	9.4	8.9	1.4	13.5	14.0	1.7	15.8	17.8	2.1	
CONDITIONS:											
Acute Myocardial Infarction	11	45.5	23.1		45.5	26.2		45.5	28.9		
Congestive Heart Failure	19	10.5	13.8		26.3	22.1		26.3	28.4		
Pneumonia/Influenza	23	26.1	13.2		30.4	18.3		30.4	21.6		
Chronic Obstructive Pulmonary Disease	18	0.0	6.6		0.0	12.9		0.0	17.8		
Transient Cerebral Ischemia	9	0.0	2.7		0.0	6.3		11.1	10.4		
Stroke	12	58.3	18.3		58.3	23.6		58.3	26.8		
Hip Fracture	1	0.0	10.3		0.0	23.5		0.0	34.3		
Sepsis	7	14.3	23.4	••••	14.3	31.2		14.3	36.7		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	4	0.0	5.9		0.0	9.1		0.0	11.8		
Carotid Endarterectomy	4	25.0	2.6		25.0	5.0		25.0	7.0		
Hip Replacement/Reconstruction	0										
Open Reduction of Hip Fracture	0										
Prostatectomy	12	0.0	1.4	*****	0.0	3.4		0.0	5.9		
Cholecystectomy	12	0.0	2.7		8.3	4.9		8.3	6.7		
Hysterectomy	4	0.0	3.1		0.0	4.6		0.0	5.4		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PRATT REGIONAL MEDICAL CENTER Medicare Provider Number: 170027

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	77.6 years	Cancer	8.2 %
Proportion female	58.8 %	Chronic cardiovascular disease	39.6 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.7 %
Referred by personal or HMO physician	51.7 %	Chronic renal disease	1.6 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	17.2 %
Admitted for elective procedure	0.0 %	Cerebrovascular degeneration	2.3 %
Admitted for emergency	18.3 %	Diabetes mellitus	6.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	70.7%	Hospital	5.7 Days
State	27.2%	State	7.3 Days
Outside State	2.1%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	0
PROFILE:	SPECIALTY SERVICES:
Total Beds 84	Burn Unit No
Occupancy Rate 26.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 54.2 %	Hospice Care No
Case Mix Index (CMI) 1.1684	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists 90.0 %	Trauma Center No OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns0	Alcohol/DrugNo
Registered Nurses	Rehabilitation No
Licensed Practical Nurses	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

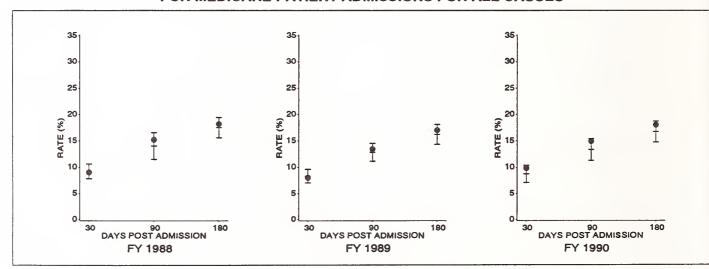
PROVIDENCE ST MARGARET HEALTH CENTER 8929 PARALLEL PARKWAY KANSAS CITY, KS 66112 Medicare Provider Number: 170146

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
			30 DAY	S	9	0 DAYS		18	0 DAYS	>
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1993	9.8	8.7	0.8	14.9	13.3	1.0	18.0	16.7	1.0
CONDITIONS:										
Acute Myocardial Infarction	66	19.7	22.8	5.7	19.7	24.9	6.2	19.7	27.1	7.0
Congestive Heart Failure	108	15.7	15.1	3.7	21.3	23.5	5.1	27.8	29.7	4.6
Pneumonia/Influenza	101	21.8	16.8	6.7	29.7	23.3	8.2	33.7	27.4	8.0
Chronic Obstructive Pulmonary Disease	35	11.4	5.3	*****	14.3	9.9		20.0	14.0	
Transient Cerebral Ischemia	24	4.2	1.9		4.2	4.3		4.2	7.0	
Stroke	69	18.8	19.2	4.9	24.6	26.0	5.5	27.5	29.9	5.7
Hip Fracture	61	3.3	6.3	4.3	13.1	11.4	4.4	18.0	15.0	5.3
Sepsis	36	47.2	30.3		55.6	38.4		55.6	42.7	
PROCEDURES:										
Angioplasty	45	6.7	5.3		6.7	6.4		6.7	7.5	
Coronary Artery Bypass Graft	23	13.0	6.1		13.0	7.9	••••	13.0	8.7	
Initial Pacemaker Insertion	24	8.3	2.2		8.3	4.5	••••	8.3	6.7	
Carotid Endarterectomy	5	0.0	1.0		0.0	1.9	••••	0.0	3.0	
Hip Replacement/Reconstruction	34	2.9	3.9		8.8	7.0		8.8	9.1	
Open Reduction of Hip Fracture	35	0.0	5.0		11.4	9.6	•	20.0	13.1	
Prostatectomy	64	1.6	0.9	1.4	1.6	2.3	2.0	3.1	4.0	2.7
Cholecystectomy	36	8.3	3.0		13.9	4.3	•	13.9	5.2	
Hysterectomy	19	5.3	0.4	••••	5.3	1.1		5.3	1.8	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases Is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PROVIDENCE ST MARGARET HEALTH CENTER Medicare Provider Number: 170146

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:
Average age at admission 75.6 years	Cancer 7.2 %
Proportion female 61.4 %	Chronic cardiovascular disease 41.6 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.5 %
Referred by personal or HMO physician 37.3 %	Chronic renal disease 2.6 %
Transferred from skilled nursing facility 0.4 %	Chronic pulmonary disease 15.5 %
Admitted for elective procedure 37.7 %	Cerebrovascular degeneration 5.7 %
Admitted for emergency	Diabetes mellitus 6.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	77.5%	Hospital	9.6 Days
State	17.3%	State	7.3 Days
Outside State	5.2%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 51.0 %	Cardiac Intensive Care No
Ownership/ControlChurch	Comprehensive Geriatric No
Medicare Discharges 38.7 %	Hospice Care No
Case Mix Index (CMI) 1.2988	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 194	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/Drug No
Registered Nurses	Rehabilitation No
Licensed Practical Nurses	Psychiatric Yes
** Except for CMI	Medicare Swing Beds No

^{*} Not used in calculating mortality rates

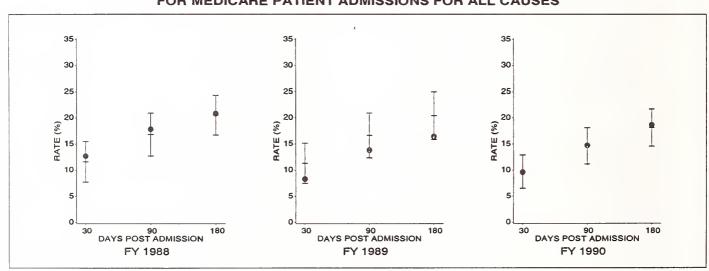
RANSOM MEMORIAL HOSPITAL
13TH & S MAIN
OTTAWA, KS 66067
Medicare Provider Number: 170014

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		3	O DAY	S	9	DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	490	9.6	9.7	1.6	14.7	14.6	1.7	18.6	18.1	1.8
CONDITIONS:										
Acute Myocardial Infarction	22	22.7	21.1		22.7	25.9		22.7	29.8	
Congestive Heart Failure	15	20.0	16.0		26.7	24.4		40.0	30.9	
Pneumonia/Influenza	35	17.1	15.5		20.0	21.5		22.9	25.7	
Chronic Obstructive Pulmonary Disease	21	0.0	4.0		0.0	7.8		0.0	11.2	
Transient Cerebral Ischemia	10	0.0	1.8		0.0	4.2		10.0	7.1	
Stroke	20	25.0	21.2		30.0	29.1	••••	35.0	33.4	
Hip Fracture	16	25.0	7.4		25.0	13.3		25.0	17.5	
Sepsis	6	33.3	34.0		50.0	47.1		50.0	52.4	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	6	33.3	6.1		33.3	11.0		33.3	14.9	
Open Reduction of Hip Fracture	7	14.3	8.1		14.3	15.2		14.3	20.3	
Prostatectomy	16	0.0	0.9		0.0	2.0		12.5	3.4	
Cholecystectomy	11	0.0	4.1		9.1	6.6		9.1	8.4	
Hysterectomy	1	0.0	0.0		0.0	0.1		0.0	0.2	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RANSOM MEMORIAL HOSPITAL Medicare Provider Number: 170014

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 78.2 years	Cancer 6.7 %
Proportion female 59.0 %	Chronic cardiovascular disease 38.6 %
DMISSION SOURCES/TYPES:	Chronic liver disease 0.4 %
Referred by personal or HMO physician 27.6 %	Chronic renal disease 3.9 %
Transferred from skilled nursing facility 0.4 %	Chronic pulmonary disease 17.3 %
Admitted for elective procedure 10.4 %	Cerebrovascular degeneration 6.5 %
Admitted for emergency	Diabetes mellitus 6.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

N:	MEDICARE AVERAGE LENGTH OF STAY:	
86.9%	Hospital	5.4 Days
10.2%	State	7.3 Days
2.9%	National	8.6 Days
100.0%		
	86.9% 10.2% 2.9%	86.9% Hospital

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 44.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 44.7 %	Hospice CareYes
Case Mix Index (CMI) 1.0522	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians9	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns	Alcohol/Drug No
Registered Nurses	Rehabilitation No
Licensed Practical Nurses	Psychiatric No
** Except for CMI	Medicare Swing BedsYes

^{*} Not used in calculating mortality rates

RAWLINS COUNTY HOSPITAL

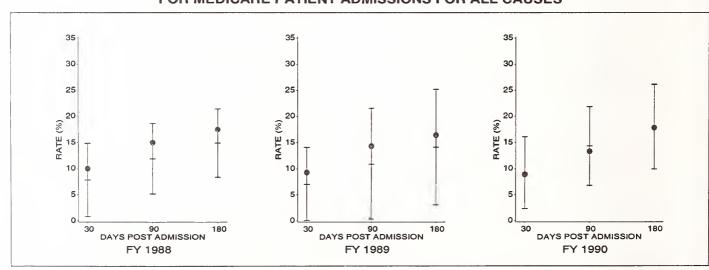
707 GRANT ST ATWOOD, KS 67730 Medicare Provider Number: 170069

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	RTALIT	Y RATE	S (%)			
		3	30 DAY	S	9	0 DAYS	3	180	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	90	8 .9	9.2	3.4	13.3	14.3	3.8	17.8	18.0	4.1
CONDITIONS:										
Acute Myocardial Infarction	2	50.0	30.9		50.0	33.6		50.0	36.8	
Congestive Heart Failure	7	14.3	18.2		28.6	28.8		28.6	36.5	
Pneumonia/Influenza	10	0.0	11.6		0.0	15.9		10.0	18.6	
Chronic Obstructive Pulmonary Disease	2	0.0	10.2		0.0	17.6		0.0	21.8	
Transient Cerebral Ischemia	2	0.0	1.6		0.0	3.7		0.0	6.5	
Stroke	0									
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	1	0.0	0.1	****	0.0	0.1		0.0	0.2	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RAWLINS COUNTY HOSPITAL Medicare Provider Number: 170069

FY1990 VALUES FOR SELEC "ED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	77.7 years	Cancer	5.6 %
Proportion female	66.7 %	Chronic cardiovascular disease	35.6 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	2.2 %
Referred by personal or HMO physician	70.0 %	Chronic renal disease	1.1 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	3.3 %
Admitted for elective procedure	5.6 %	Cerebrovascular degeneration	2.2 %
Admitted for emergency	0.0 %	Diabetes mellitus	8.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	70.9%	Hospital	4.9 Days
State	13.9%	State	7.3 Days
Outside State	15.2%	National	8.6 Days
Total	100.0%		

PROFILE:		SPECIALTY SERVICES:	
Total Beds	24	Burn Unit	No
Ownership.Control Private, Non-Pro	ofit	Coronary Care Unit	No
Case Mix Index (CMI) 0.89	930	Hospice Care	No
STAFFING:		Intensive Care Unit	No
Medical Residents/Interns	0	Organ Transplant	No
Registered Nurses	7	Trauma Center	No
Licensed Practical Nurses	5	OTHER SPECIALTY/HOSPITAL-BASED SERVICES	:
		Alcohol/Drug	No
		Rehabilitation	No
		Psychiatric	No
		Medicare Swing Beds	res .

^{*} Not used in calculating mortality rates

REPUBLIC COUNTY HOSPITAL

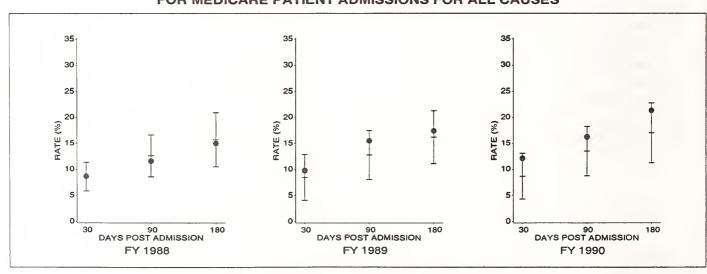
24TH & G STREET BELLEVILLE, KS 66935 Medicare Provider Number: 170024

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		30 DAYS			90 DAYS			180	180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	314	12.1	8.7	2.2	16.2	13.5	2.4	21.3	17.0	2.9	
CONDITIONS:											
Acute Myocardial Infarction	12	50.0	31.9		50.0	35.1		50.0	37.7		
Congestive Heart Failure	14	21.4	18.6		21.4	28.7		35.7	35.0		
Pneumonia/Influenza	28	25.0	15.1		35.7	21.1		42.9	24.4		
Chronic Obstructive Pulmonary Disease	3	0.0	2.8		0.0	5.4		0.0	7.9		
Transient Cerebral Ischemia	0										
Stroke	12	25.0	17.1		25.0	23.2		50.0	26.7		
Hip Fracture	7	0.0	4.8		0.0	9.1		0.0	12.4		
Sepsis	3	66.7	19.7		66.7	29.0		66.7	34.3		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	4	25.0	7.0		50.0	14.0	*****	50.0	19.0		
Carotid Endarterectomy	1	100.0	0.8		100.0	1.3		100.0	2.1		
Hip Replacement/Reconstruction	5	0.0	3.8	****	0.0	7.4		0.0	10.3		
Open Reduction of Hip Fracture	1	0.0	3.3		0.0	6.2		0.0	9.4		
Prostatectomy	13	0.0	0.6		0.0	1.3		0.0	2.2		
Cholecystectomy	5	0.0	0.7		0.0	1.2		0.0	1.7		
Hysterectomy	4	0.0	1.2		0.0	2.8		0.0	4.4		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



REPUBLIC COUNTY HOSPITAL Medicare Provider Number: 170024

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	78.5 years	Cancer	8.9 %
Proportion female	56.4 %	Chronic cardiovascular disease	39.8 %
ADMISSION SOURCES/TYPES:		Chronic liver dlsease	0.3 %
Referred by personal or HMO physician	53.2 %	Chronic renal disease	0.3 %
Transferred from skilled nursing facility	1.0 %	Chronic pulmonary disease	9.2 %
Admitted for elective procedure	78.3 %	Cerebrovascular degeneration	4.1 %
Admitted for emergency	9.2 %	Diabetes mellitus	7.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

N:	MEDICARE AVERAGE LENGTH OF STAY:	
68.1%	Hospital	5.8 Days
21.5%	State	7.3 Days
10.4%	National	8.6 Days
100.0%		
	68.1% 21.5% 10.4%	68.1% Hospital

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE:	SPECIALTY SERVICES:
Total Beds 86	Burn Unit No
Occupancy Rate 58.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric Yes
Medicare Discharges 57.6 %	Hospice Care No
Case Mix Index (CMI) 1.1911	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians7	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
_	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns	Alcohol/DrugNo
Registered Nurses	Rehabilitation No
Licensed Practical Nurses 6	Psychiatric No
** Except for CMI	Medicare Swing BedsYes

^{*} Not used in calculating mortality rates

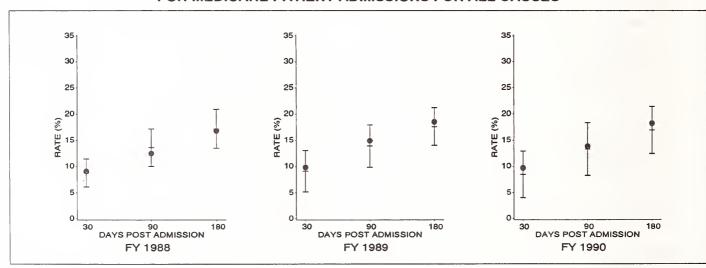
RIVERSIDE HOSPITAL 2622 W CENTRAL ST WICHITA, KS 67203 Medicare Provider Number: 170147

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)										
		30 DAYS			9	0 DAYS	3	18	180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	587	9.7	8.5	2.2	13.8	13.3	2.5	18.2	16.9	2.3	
CONDITIONS:											
Acute Myocardial Infarction	11	36.4	27.4		45.5	31.8		45.5	35.0		
Congestive Heart Failure	31	16.1	15.2		19.4	24.1		25.8	29.8		
Pneumonia/Influenza	45	26.7	15.1		33.3	20.9		42.2	24.9		
Chronic Obstructive Pulmonary Disease	14	0.0	5.7		14.3	10.7		14.3	15.2		
Transient Cerebral Ischemia	5	20.0	5.0		20.0	11.4		20.0	17.5		
Stroke	12	25.0	16.7		25.0	22.7		25.0	26.0		
Hip Fracture	19	15.8	7.2		15.8	13.6		26.3	18.4		
Sepsis	3	33.3	22.5		33.3	34.1		33.3	39.3		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	7	0.0	1.2		14.3	2.9		14.3	4.9		
Carotid Endarterectomy	3	0.0	1.7		0.0	3.3		0.0	4.9		
Hip Replacement/Reconstruction	7	0.0	3.9		0.0	8.0		14.3	11.3		
Open Reduction of Hip Fracture	9	22.2	8.2		22.2	15.9		22.2	22.0		
Prostatectomy	7	0.0	0.4		0.0	1.0		0.0	1.7		
Cholecystectomy	7	0.0	1.1		0.0	2.3		0.0	3.4		
Hysterectomy	5	0.0	0.4		0.0	1.1		0.0	1.9		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RIVERSIDE HOSPITAL Medicare Provider Number: 170147

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

EMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	73.9 years	Cancer	5.1 %
Proportion female	58.9 %	Chronic cardiovascular disease	30.8 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.0 %
Referred by personal or HMO physician	43.4 %	Chronic renal disease	4.1 %
Transferred from skilled nursing facility	0.3 %	Chronic pulmonary disease	26.9 %
Admitted for elective procedure	17.7 %	Cerebrovascular degeneration	8.5 %
Admitted for emergency	0.7 %	Diabetes mellitus	7.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

N:	MEDICARE AVERAGE LENGTH OF STAY:	
83.0%	Hospital	7.3 Days
13.3%	State	7.3 Days
3.7%	National	8.6 Days
100.0%		
	83.0% 13.3% 3.7%	83.0% Hospital

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE:	SPECIALTY SERVICES:
Total Beds 125	Burn Unit No
Occupancy Rate 51.0 %	Cardlac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 40.8 %	Hospice Care No
Case Mix Index (CMI) 1.1518	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns9	Alcohol/DrugYes
Registered Nurses	Rehabilitation No
Licensed Practical Nurses 18	
	Psychiatric No
* Except for CMI	Medicare Swing BedsYes

^{*} Not used in calculating mortality rates

RUSH COUNTY MEMORIAL HOSPITAL

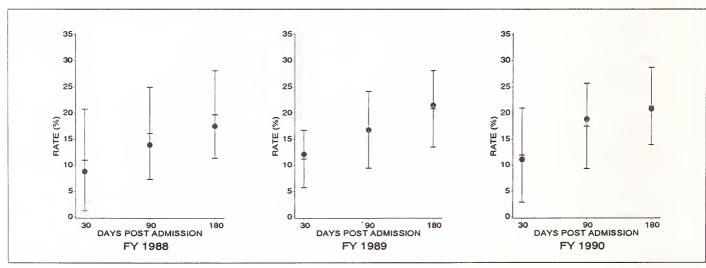
8TH & LOCUST STS LA CROSSE, KS 67548 Medicare Provider Number: 170119

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
	NUMBER OF CASES		30 DAY	S	9	0 DAYS	3	180 DAYS			
CATEGORY		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	144	11.1	11.9	4.5	18.8	17.5	4.1	20.8	21.3	3.7	
CONDITIONS:											
Acute Myocardial Infarction	2	100.0	45.6		100.0	48.7		100.0	52.6		
Congestive Heart Failure	10	10.0	15.8		10.0	24.0		20.0	29.7		
Pneumonia/Influenza	35	20.0	17.7		25.7	24.5		31.4	28.6		
Chronic Obstructive Pulmonary Disease	0										
Transient Cerebral Ischemia	4	0.0	1.4		0.0	3.2		0.0	5.5		
Stroke	5	20.0	25.7		60.0	35.1		60.0	40.7		
Hip Fracture	1	0.0	6.2		0.0	10.7		0.0	13.1		
Sepsis	0										
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	0										
Open Reduction of Hip Fracture	0										
Prostatectomy	0										
Cholecystectomy	0										
Hysterectomy	2	0.0	0.1		0.0	0.1		0.0	0.3		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (* 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RUSH COUNTY MEMORIAL HOSPITAL Medicare Provider Number: 170119

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

EMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	80.4 years	Cancer	4.9 %
Proportion female	68.8 %	Chronic cardiovascular disease	68.1 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	43.8 %	Chronic renal disease	1.4 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	13.9 %
Admitted for elective procedure	4.2 %	Cerebrovascular degeneration	6.3 %
Admitted for emergency	5.6 %	Diabetes mellitus	6.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	80.0%	Hospital	7.4 Days
State	18.2%	State	7.3 Day
Outside State	1.8%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE: Total Beds	SPECIALTY SERVICES: Burn Unit No Cardiac Intensive Care No Comprehensive Geriatric No Hospice Care No Medical/Surgical Intensive Care No Organ/Tissue Transplant No Other Intensive Care No Trauma Center No OTHER SPECIALTY/HOSPITAL-BASED SERVICES: Alcohol/Drug No Rehabilitation No Psychiatric No
** Except for CMI	Medicare Swing BedsYes

^{*} Not used in calculating mortality rates

RUSSELL REGIONAL HOSPITAL

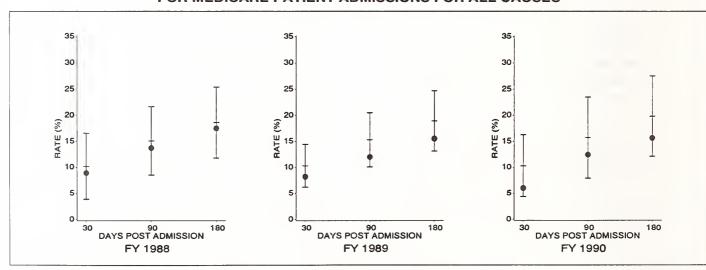
200 S MAIN RUSSELL, KS 67665 Medicare Provider Number: 170030

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	DRTALIT	Y RATE	S (%)				
			30 DAYS		9	90 DAYS			180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	250	6.0	10.3	3.0	12.4	15.7	3.9	15.6	19.8	3.9	
CONDITIONS:											
Acute Myocardial Infarction	13	30.8	28.6		46.2	31.6		46.2	34.2		
Congestive Heart Failure	23	4.3	16.7		13.0	26.3		17.4	33.0		
Pneumonia/Influenza	20	10.0	17.3		15.0	23.2		20.0	27.2		
Chronic Obstructive Pulmonary Disease	5	0.0	4.7		0.0	10.1		20.0	14.9		
Transient Cerebral Ischemia	5	0.0	2.1		0.0	4.6		0.0	7.4		
Stroke	7	0.0	25.8		14.3	33.5		28.6	38.4		
Hip Fracture	0										
Sepsis	0										
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	0										
Open Reduction of Hip Fracture	0										
Prostatectomy	2	0.0	0.4		0.0	0.9		0.0	1.6		
Cholecystectomy	5	0.0	1.0		0.0	1.8		0.0	2.3		
Hysterectomy	1	0.0	0.1		0.0	0.4	****	0.0	0.7		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RUSSELL REGIONAL HOSPITAL Medicare Provider Number: 170030

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	78.3 years	Cancer	8.8 %
Proportion female	59.6 %	Chronic cardiovascular disease	50.4 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.8 %
Referred by personal or HMO physician	54.8 %	Chronic renal disease	3.2 %
Transferred from skilled nursing facility	0.8 %	Chronic pulmonary disease	20.8 %
Admitted for elective procedure	5.6 %	Cerebrovascular degeneration	2.0 %
Admitted for emergency	1.2 %	Diabetes mellitus	7.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	87.4%	Hospital	5.5 Days
State	10.8%	State	7.3 Days
Outside State	1.8%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 32.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Gerlatric No
Medicare Discharges 63.2 %	Hospice Care No
Case Mix Index (CMI) 1.0118	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 3	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
Medical Residents/Interns	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
in our day in control in the internal in the i	Alcohol/Drug No
Registered Nurses	RehabilitationNo
Licensed Fractical Nuises	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

SABETHA COMMUNITY HOSPITAL

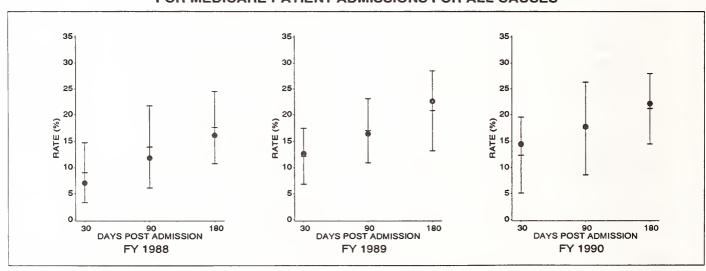
14TH & OREGON SABETHA, KS 66534 Medicare Provider Number: 170164

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	S (%)						
		30 DAYS			9	90 DAYS			180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	181	14.4	12.3	3.6	17.7	17.4	4.4	22.1	21.2	3.4	
CONDITIONS:											
Acute Myocardial Infarction	19	42.1	32.9		47.4	37.2		47.4	40.7		
Congestive Heart Failure	13	15.4	13.2		15.4	20.9		23.1	26.7		
Pneumonia/Influenza	11	27.3	20.4		27.3	27.3		36.4	31.5		
Chronic Obstructive Pulmonary Disease	1	0.0	4.1		0.0	7.3		100.0	10.5		
Transient Cerebral Ischemia	0										
Stroke	6	33.3	22.8		33.3	27.9		33.3	32.5		
Hip Fracture	0										
Sepsis	3	33.3	23.3		100.0	32.7		100.0	36.9		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	0										
Open Reduction of Hip Fracture	0										
Prostatectomy	6	0.0	0.5		0.0	1.1		0.0	2.0		
Cholecystectomy	1	0.0	1.0		0.0	1.8		0.0	2.4		
Hysterectomy	0										

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SABETHA COMMUNITY HOSPITAL Medicare Provider Number: 170164

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	79.9 years	Cancer	7.7 %
Proportion female	55.8 %	Chronic cardiovascular disease	39.2 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.1 %
Referred by personal or HMO physician	60.2 %	Chronic renal disease	5.0 %
Transferred from skilled nursing facility	0.6 %	Chronic pulmonary disease	9.9 %
Admitted for elective procedure	22.7 %	Cerebrovascular degeneration	1.1 %
Admitted for emergency	12.7 %	Diabetes mellitus	8.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	78.4%	Hospital	5.4 Days
State	19.6%	State	7.3 Days
Outside State	2.0%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 198	9
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 25.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric Yes
Medicare Discharges 66.9 %	Hospice Care No
Case Mix Index (CMI) 1.0782	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 5	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
modical residency means and	Alcohol/DrugNo
Registered Nurses 9 Licensed Practical Nurses 6	Rehabilitation No
Licensed Practical Nurses	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

SALEM HOSPITAL INC

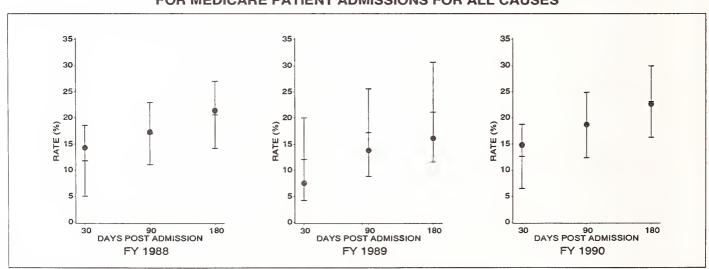
701 S MAIN ST HILLSBORO, KS 67063 Medicare Provider Number: 170026

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				M	ORTALIT	Y RATE	S (%)				
		30 DAYS			9	90 DAYS			180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	155	14.8	12.6	3.1	18.7	18.6	3.1	22.6	23.1	3.4	
CONDITIONS:											
Acute Myocardial Infarction	5	20.0	37.0		40.0	41.4		60.0	45.7		
Congestive Heart Failure	22	22.7	15.2		31.8	24.2		36.4	31.3		
Pneumonia/Influenza	7	28.6	19.1		28.6	26.1		28.6	30.1		
Chronic Obstructive Pulmonary Disease	1	0.0	3.9		0.0	8.0		0.0	11.2		
Transient Cerebral Ischemia	6	0.0	1.6		16.7	3.8		16.7	6.3		
Stroke	9	33.3	24.1		33.3	29.9		44.4	33.6		
Hip Fracture	7	0.0	7.2		0.0	12.8		0.0	16.5		
Sepsis	1	0.0	45.1		0.0	49.3		0.0	54.3		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	3	0.0	4.5		0.0	8.5		0.0	11.9		
Open Reduction of Hip Fracture	6	0.0	6.7		0.0	12.0		0.0	15.7		
Prostatectomy	1	0.0	1.9		0.0	5.4		0.0	9.9		
Cholecystectomy	1	0.0	0.8		0.0	1.6		0.0	2.2		
Hysterectomy	0										

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SALEM HOSPITAL INC Medicare Provider Number: 170026

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 80.9 years	Cancer 5.2 %
Proportion female 56.1 %	Chronic cardiovascular disease 49.7 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.0 %
Referred by personal or HMO physician 31.0 %	Chronic renal disease 1.3 %
Transferred from skilled nursing facility 1.3 %	Chronic pulmonary disease 9.7 %
Admitted for elective procedure 0.6 %	Cerebrovascular degeneration 10.3 %
Admitted for emergency 64.5 %	Diabetes mellitus 5.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	1:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	84.9%	Hospital	4.5 Days
State	13.4%	State	7.3 Days
Outside State	1.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 75.0 %	Cardiac Intensive Care No
Ownership/ControlChurch	Comprehensive Geriatric No
Medicare Discharges 66.1 %	Hospice Care No
Case Mix Index (CMI) 1.0706	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 15	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns	Alcohol/Drug No
Registered Nurses	Rehabilitation No
Licensed Practical Nurses	Psychiatric
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

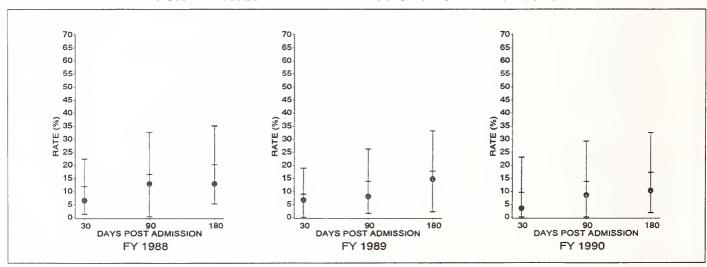
SATANTA DISTRICT HOSPITAL

CHEYENNE AND APACHE SATANTA, KS 67870 Medicare Provider Number: 170139

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

			S (%)							
CATEGORY			30 DAY	S	9	0 DAYS	S	180 DAYS		;
	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	59	3.4	9.6	6.7	8.5	13.7	7.8	10.2	17.1	7.7
CONDITIONS:										
Acute Myocardial Infarction	1	0.0	15.1		0.0	16.2		0.0	17.9	
Congestive Heart Failure	11	18.2	16.8		18.2	24.6		27.3	31.6	
Pneumonia/Influenza	11	0.0	13.0		0.0	17.2		0.0	20.3	
Chronic Obstructive Pulmonary Disease	1	0.0	10.7		0.0	15.1		0.0	17.5	
Transient Cerebral Ischemia	0									
Stroke	2	0.0	22.8		0.0	26.4	*****	0.0	29.7	
Hip Fracture	1	0.0	2.8		0.0	5.4		0.0	7.4	
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



SATANTA DISTRICT HOSPITAL

Medicare Provider Number: 170139

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	78.3 years	Cancer	0.0 %
Proportion female	-	Chronic cardiovascular disease	59.3 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	45.8 %	Chronic renal disease	3.4 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	8.5 %
Admitted for elective procedure	3.4 %	Cerebrovascular degeneration	1.7 %
Admitted for emergency	6.8 %	Diabetes mellitus	5.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

1				
	ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
	County/City	74.6%	Hospital	6.6 Days
	State	22.6%	State	7.3 Days
	Outside State	2.8%	National	8.6 Days
	Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	989
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 73.0 %	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Geriatric No
Medicare Discharges	Hospice Care No
Case Mix Index (CMI) 0.9539	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians2	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
· ·	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns0	Alcohol/Drug No
Registered Nurses 10	RehabilitationNo
Licensed Practical Nurses 2	
	Psychiatric No
Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

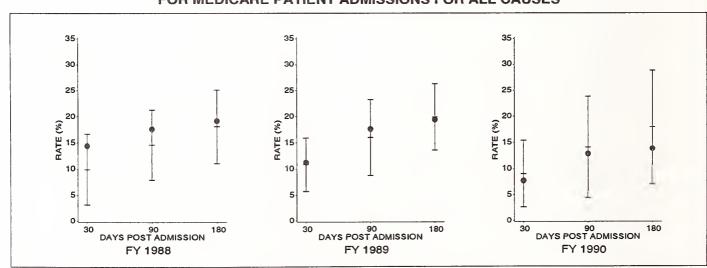
SCOTT COUNTY HOSPITAL

310 EAST THIRD SCOTT CITY, KS 67871 Medicare Provider Number: 170085

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY						TALITY RATES (%)			
			30 DAY	S	9	0 DAYS	3	18	180 DAYS		
	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD°	OBS	PRED	SD*	
ALL CAUSES	196	7.7	9.0	3.2	12.8	14.1	4.9	13.8	17.9	5.4	
CONDITIONS:											
Acute Myocardial Infarction	0										
Congestive Heart Failure	5	0.0	13.2		20.0	20.7		20.0	26.6		
Pneumonia/Influenza	18	16.7	13.8		22.2	19.0		22.2	22.8		
Chronic Obstructive Pulmonary Disease	3	0.0	7.4		0.0	12.9		0.0	18.2		
Transient Cerebral Ischemia	1	0.0	2.2		0.0	4.9		0.0	8.0		
Stroke	5	20.0	22.3		40.0	31.2		40.0	37.4		
Hip Fracture	1	0.0	5.4		0.0	12.4		0.0	18.2		
Sepsis	3	33.3	30.1		66.7	41.9		66.7	49.3		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	0										
Open Reduction of Hip Fracture	1	0.0	4.8		0.0	11.3		0.0	17.0		
Prostatectomy	0										
Cholecystectomy	5	0.0	1.0		0.0	1.7		0.0	2.2		
Hysterectomy	4	0.0	0.2	••••	0.0	0.5		0.0	0.8	*****	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



SCOTT COUNTY HOSPITAL Medicare Provider Number: 170085

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	76.8 years	Cancer	6.6 %
Proportion female	58.2 %	Chronic cardiovascular disease	40.8 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.5 %
Referred by personal or HMO physiclan	86.2 %	Chronic renal disease	2.6 %
Transferred from skilled nursing facility	2.6 %	Chronic pulmonary disease	20.9 %
Admitted for elective procedure	10.7 %	Cerebrovascular degeneration	1.5 %
Admitted for emergency	14.3 %	Diabetes mellitus	7.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

I				
	ORIGIN OF MEDICARE PATIENT ADMISSION:		MEDICARE AVERAGE LENGTH OF STAY:	
	County/City	32.2%	Hospital	4.7 Days
	State1	15.7%	State	7.3 Days
	Outside State	2.1%	National	8.6 Days
	Total 10	00.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 44.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Gerlatric No
Medicare Discharges 58.8 %	Hospice Care No
Case Mix Index (CMI) 0.9705	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/Drug No
Registered Nurses	Rehabilitation No
Licensed Practical Nurses	Psychlatric No
** Except for CMI	Medicare Swing Beds Yes

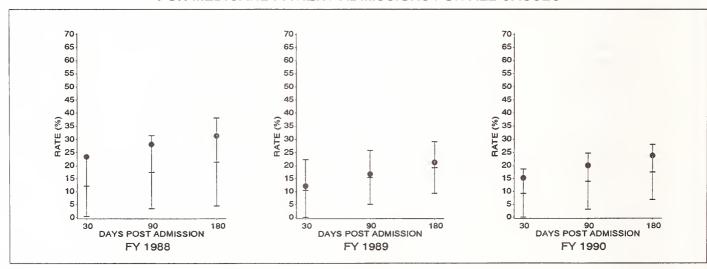
^{*} Not used in calculating mortality rates

SEDAN CITY HOSPITAL
300 NORTH STREET
SEDAN, KS 67361
Medicare Provider Number: 170106

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	M					ORTALITY RATES (%)					
	NUMBER OF CASES	3	30 DAYS			90 DAYS			180 DAYS		
CATEGORY		OBS	PRED	SD*	OBS	PRED	SD°	OBS	PRED	SD*	
ALL CAUSES	105	15.2	9.2	4.7	20.0	13.9	5.4	23.8	17.4	5.3	
CONDITIONS:											
Acute Myocardial Infarction	2	50.0	14.4		50.0	16.6		50.0	18.6		
Congestive Heart Failure	4	0.0	16.7		0.0	25.6		0.0	31.0		
Pneumonia/Influenza	16	31.3	14.5		50.0	19.8		50.0	23.5		
Chronic Obstructive Pulmonary Disease	4	50.0	12.1		50.0	19.0		50.0	24.1		
Transient Cerebral Ischemia	4	0.0	1.3		25.0	3.2		25.0	5.6		
Stroke	2	50.0	16.0		50.0	19.5		50.0	22.4		
Hip Fracture	0										
Sepsis	0										
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	0										
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	0										
Open Reduction of Hip Fracture	0										
Prostatectomy	0										
Cholecystectomy	0										
Hysterectomy	0										

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



SEDAN CITY HOSPITAL Medicare Provider Number: 170106

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	79.3 years	Cancer	4.8 %
Proportion female	60.0 %	Chronic cardiovascular disease	25.7 %
DMISSION SOURCES/TYPES:		Chronic liver disease	1.9 %
Referred by personal or HMO physician	38.1 %	Chronic renal disease	0.0 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	7.6 %
Admitted for elective procedure	12.4 %	Cerebrovascular degeneration	0.0 %
Admitted for emergency	6.7 %	Diabetes mellitus	1.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	۷:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	70.9%	Hospital	5.3 Days
State	25.2%	State	7.3 Days
Outside State	3.9%	National	8.6 Days
Total	100.0%		

PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit

^{*} Not used in calculating mortality rates

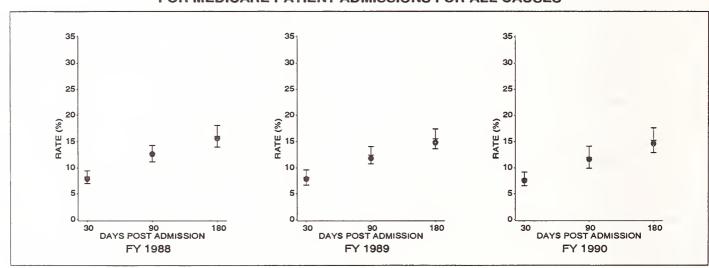
SHAWNEE MISSION MEDICAL CENTER

9100 WEST 74TH SHAWNEE MISSION, KS 66201 Medicare Provider Number: 170104

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	ORTALIT	Y RATE	S (%)			
			0 DAY	s	9	0 DAYS	•	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2851	7.5	7.8	0.7	11.6	12.0	1.1	14.6	15.2	1.2
CONDITIONS:										
Acute Myocardial Infarction	81	24.7	27.9	5.6	27.2	30.7	6.1	30.9	33.4	6.7
Congestive Heart Failure	124	15.3	14.0	4.1	24.2	22.5	4.7	32.3	28.4	6.2
Pneumonia/Influenza	116	11.2	15.2	4.6	19.0	21.2	5.1	26.7	25.2	5.1
Chronic Obstructive Pulmonary Disease	62	8.1	5.0	4.2	11.3	9.4	4.6	17.7	13.2	5.7
Transient Cerebral Ischemia	33	0.0	1.6		0.0	3.4		3.0	5.6	
Stroke	116	19.8	19.2	5.2	20.7	25.6	6.8	26.7	29.3	7.9
Hip Fracture	76	5.3	5.7	2.7	9.2	10.5	4.0	10.5	14.0	5.5
Sepsis	41	22.0	27.1		31.7	34.5		34.1	39.1	
PROCEDURES:										
Angioplasty	79	10.1	5.1	3.3	10.1	6.1	3.4	11.4	7.2	3.5
Coronary Artery Bypass Graft	62	11.3	5.6	5.5	12.9	7.8	5.1	14.5	8.8	5.5
Initial Pacemaker Insertion	14	0.0	2.8		0.0	5.4		0.0	7.7	
Carotid Endarterectomy	28	0.0	1.5		0.0	2.8		0.0	4.1	
Hip Replacement/Reconstruction	63	4.8	2.5	3.3	6.3	4.8	3.3	6.3	6.6	3.3
Open Reduction of Hip Fracture	36	2.8	6.0		8.3	11.1		11.1	14.8	
Prostatectomy	129	0.0	8.0	1.0	0.8	1.8	1.5	1.6	3.1	2.0
Cholecystectomy	58	3.4	1.7	2.4	3.4	3.2	3.2	5.2	4.5	3.5
Hysterectomy	34	0.0	0.2		0.0	0.6		0.0	0.9	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



SHAWNEE MISSION MEDICAL CENTER Medicare Provider Number: 170104

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:
Average age at admission 74.3 years	Cancer 7.0 %
Proportion female 56.2 %	Chronic cardiovascular disease 31.3 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.8 %
Referred by personal or HMO physician 74.3 %	Chronic renal disease 2.7 %
Transferred from skilled nursing facility 0.0 %	Chronic pulmonary disease 16.6 %
Admitted for elective procedure 23.6 %	Cerebrovascular degeneration 4.5 %
Admitted for emergency 57.9 %	Diabetes mellitus 6.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	67.3%	Hospital	7.5 Days
State	22.2%	State	7.3 Days
Outside State	10.5%	National	8.6 Days
Total	100.0%		

PROFILE:	SPECIALTY SERVICES:
Total Beds 333	Burn Unit No
Occupancy Rate 68.0 %	Cardiac Intensive Care No
Ownership/Control	Comprehensive Geriatric No
Medicare Discharges 33.1 %	Hospice Care No
Case Mix Index (CMI) 1.3946	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 235	Other Intensive Care
Percent of Physicians Board Certified Specialists	Trauma Center N
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/DrugYe
Registered Nurses	Rehabilitation N
Licensed Practical Nurses	Psychiatric Ye

^{*} Not used in calculating mortality rates

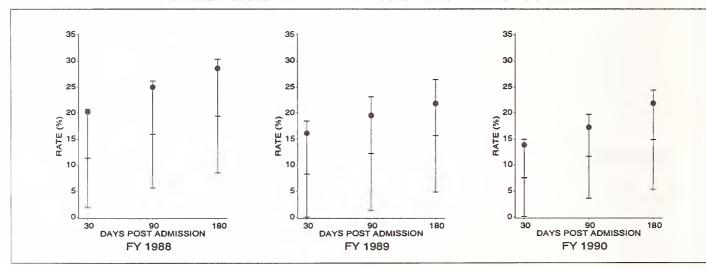
SHERIDAN COUNTY HOSPITAL

826-EIGHTEENTH STREET
HOXIE, KS 67740
Medicare Provider Number: 170063

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				M	ORTALIT	YRATE	S (%)			
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	87	13.8	7.5	3.7	17.2	11.6	4.0	21.8	14.8	4.8
CONDITIONS:										
Acute Myocardial Infarction	3	33.3	19.2		33.3	22.2		66.7	24.4	
Congestive Heart Failure	6	33.3	19.2	*****	50.0	31.1		66.7	40.4	
Pneumonia/Influenza	7	14.3	12.6		14.3	16.5		14.3	19.7	
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	4	25.0	1.4		25.0	3.6		25.0	6.4	
Stroke	2	50.0	22.2		100.0	34.0		100.0	40.4	
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	2	0.0	0.4		0.0	8.0		0.0	1.1	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



SHERIDAN COUNTY HOSPITAL Medicare Provider Number: 170063

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	76.4 years	Cancer	5.7 %
Proportion female	63.2 %	Chronic cardiovascular disease	31.0 %
DMISSION SOURCES/TYPES:		Chronic Ilver disease	0.0 %
Referred by personal or HMO physician	65.5 %	Chronic renal disease	4.6 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	9.2 %
Admitted for elective procedure	65.5 %	Cerebrovascular degeneration	2.3 %
Admitted for emergency	12.6 %	Diabetes mellitus	5.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

٧:	MEDICARE AVERAGE LENGTH OF STAY:	
78.4%	Hospital	4.4 Days
18.9%	State	7.3 Days
2.7%	National	8.6 Days
100.0%		
	78.4% 18.9% 2.7%	78.4% Hospital

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	90
PROFILE:	SPECIALTY SERVICES:
Total Beds 59	Burn Unit No
Occupancy Rate 72.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric Yes
Medicare Discharges 39.8 %	Hospice Care No
Case Mix Index (CMI) 0.8559	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	·
Registered Nurses 7	Alcohol/Drug
Licensed Practical Nurses 5	Rehabilitation
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

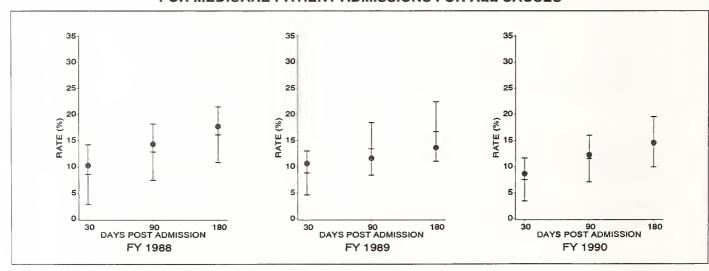
SMITH COUNTY MEMORIAL HOSPITAL

614 S MAIN ST SMITH CENTER, KS 66967 Medicare Provider Number: 170093

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	DRTALIT	YRATE	S (%)			
			30 DAY	s	9	0 DAYS	\$	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	221	8.6	7.5	2.1	12.2	11.5	2.2	14.5	14.7	2.4
CONDITIONS:										
Acute Myocardial Infarction	7	71.4	20.2		71.4	25.3		85.7	28.6	
Congestive Heart Failure	13	15.4	13.1		15.4	21.2		30.8	27.3	
Pneumonia/Influenza	15	0.0	12.3		20.0	17.3		20.0	21.2	
Chronic Obstructive Pulmonary Disease	7	0.0	4.7		0.0	8.8	*****	0.0	12.6	
Transient Cerebral Ischemia	7	0.0	1.4		0.0	3.3		0.0	5.6	
Stroke	14	21.4	15.6		21.4	20.7		21.4	24.2	
Hip Fracture	0									
Sepsis	3	33.3	26.8		33.3	39.4		66.7	46.4	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	5	20.0	3.2		20.0	6.5		20.0	9.3	
Hysterectomy	2	0.0	0.9		0.0	2.1		0.0	3.5	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



SMITH COUNTY MEMORIAL HOSPITAL Medicare Provider Number: 170093

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:
Average age at admission 78.1 years	Cancer 5.4 %
Proportion female 59.7 %	Chronic cardiovascular disease 25.3 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.5 %
Referred by personal or HMO physician 58.4 %	Chronic renal disease 0.5 %
Transferred from skilled nursing facility 0.5 %	Chronic pulmonary disease 11.3 %
Admitted for elective procedure 10.9 %	Cerebrovascular degeneration 4.1 %
Admitted for emergency 0.9 %	Diabetes mellitus 4.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:	MEDICARE AVERAGE LENGTH OF STAY:
County/City79.9%	Hospital 3.8 Days
State	State 7.3 Days
Outside State	National 8.6 Days
Total	

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 61.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 60.6 %	Hospice Care No
Case Mix Index (CMI) 0.9972	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug No
	Rehabilitation No
Licensed Practical Nurses4	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

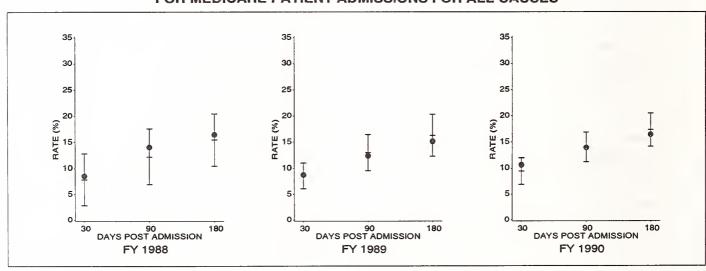
^{*} Not used in calculating mortality rates

SOUTHWEST MEDICAL CENTER
WEST 15TH BOX 1340
LIBERAL, KS 67905
Medicare Provider Number: 170068

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%									
			30 DAY	S	9	90 DAYS			0 DAYS	,
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD°	OBS	PRED	SD*
ALL CAUSES	597	10.6	9.4	1.3	13.9	14.0	1.4	16.4	17.3	1.6
CONDITIONS:										
Acute Myocardial Infarction	18	27.8	22.8		27.8	25.5		27.8	28.1	
Congestive Heart Failure	34	14.7	13.6		20.6	21.7		20.6	27.4	
Pneumonia/Influenza	48	25.0	14.1		25.0	19.0		25.0	22.2	****
Chronic Obstructive Pulmonary Disease	10	30.0	9.5		30.0	15.3		30.0	19.8	
Transient Cerebral Ischemla	6	0.0	1.8		0.0	4.0		16.7	6.3	
Stroke	26	15.4	17.0		19.2	23.0		19.2	26.5	
Hip Fracture	10	10.0	5.1		10.0	8.9		10.0	11.9	
Sepsis	8	12.5	20.7		12.5	26.4		25.0	30.7	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	5	0.0	1.7		0.0	3.6		20.0	5.5	
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	2	50.0	8.1		50.0	13.2		50.0	18.4	
Prostatectomy	21	0.0	8.0		0.0	1.8		4.8	3.3	
Cholecystectomy	12	0.0	1.5		0.0	2.6		0.0	3.3	
Hysterectomy	20	0.0	0.3		0.0	0.8		0.0	1.3	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases Is too small for satisfactory estimation.



SOUTHWEST MEDICAL CENTER Medicare Provider Number: 170068

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 7	75.5 vears	Cancer	6.7 %
Proportion female	-		
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.0 %
Referred by personal or HMO physician 5	57.6 %	Chronic renal disease	1.5 %
Transferred from skilled nursing facility	1.7 %	Chronic pulmonary disease	15.9 %
Admitted for elective procedure	0.0 %	Cerebrovascular degeneration	1.5 %
Admitted for emergency	96.8 %	Diabetes mellitus	5.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	51.1%	Hospital	6.3 Days
State	16.2%	State	7.3 Days
Outside State	32.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 199	90
PROFILE:	SPECIALTY SERVICES:
Total Beds 86	Burn Unit No
Occupancy Rate 48.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 33.6 %	Hospice Care No
Case Mix Index (CMI) 1.1334	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
·	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/DrugNo
Registered Nurses	Rehabilitation No
LICENSEU FIACTICAL INUISES	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

SPEARVILLE DISTRICT HOSPITAL

HALL & DORSETT STS SPEARVILLE, KS 67876 Medicare Provider Number: 170173

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD°	OBS	PRED	SD*
ALL CAUSES	25	20.0	15.5		20.0	22.7		24.0	27.6	
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	0									
Pneumonia/Influenza	1	0.0	5.8		0.0	8.2		0.0	10.5	
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	0									
Stroke	1	0.0	14.6		0.0	19.8		0.0	23.3	
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

SPEARVILLE DISTRICT HOSPITAL Medicare Provider Number: 170173

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	81.8 years	Cancer	8.0 %
Proportion female	56.0 %	Chronic cardiovascular disease	32.0 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	52.0 %	Chronic renal disease	0.0 %
Transferred from skilled nursing facility	16.0 %	Chronic pulmonary disease	8.0 %
Admitted for elective procedure	52.0 %	Cerebrovascular degeneration	16.0 %
Admitted for emergency	12.0 %	Diabetes mellitus	8.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	98.0%	Hospital	6.6 Days
State	2.0%	State	7.3 Days
Outside State	0.0%	National	8.6 Days
Total	100.0%		

PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 50.0 %	Cardiac Intensive Care No
Ownership/Control District/Authority	Comprehensive Geriatric Yes
Medicare Discharges	Hospice Care No
Case Mix Index (CMI) 1.0099	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 8	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center
Medical Residents/Interns 0	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Registered Nurses 5	Alcohol/Drug
Licensed Practical Nurses	Rehabilitation
* Except for CMI	Medicare Swing BedsYes

^{*} Not used in calculating mortality rates

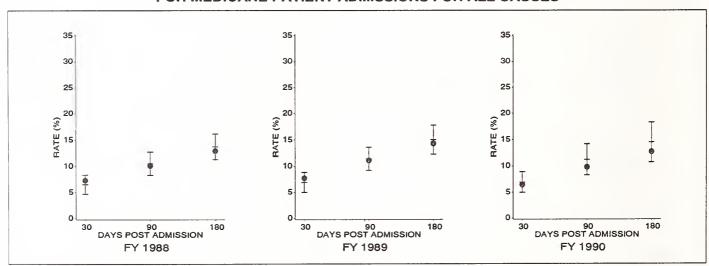
ST ANTHONY HOSPITAL

2220 CANTERBURY RD HAYS, KS 67601 Medicare Provider Number: 170003

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
		- ;	30 DAY	S	9	0 DAYS	3	18	180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	786	6.4	6.9	1.0	9.8	11.2	1.5	12.7	14.5	1.9	
CONDITIONS:											
Acute Myocardial Infarction	16	18.8	25.8		18.8	29.4		18.8	32.5		
Congestive Heart Failure	33	9.1	14.0		27.3	22.2		39.4	28.0		
Pneumonia/Influenza	33	6.1	15.7		9.1	21.1		15.2	24.9		
Chronic Obstructive Pulmonary Disease	17	5.9	7.8		5.9	14.3		11.8	19.3		
Transient Cerebral Ischemia	8	0.0	1.1		0.0	2.6		0.0	4.4		
Stroke	23	21.7	14.6		26.1	20.7		26.1	24.4		
Hip Fracture	29	6.9	6.4		6.9	11.9		10.3	16.0		
Sepsis	5	40.0	22.4		40.0	26.3		40.0	30.0		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	3	0.0	2.1		0.0	3.8		0.0	5.2		
Carotid Endarterectomy	12	8.3	8.0		8.3	1.6		8.3	2.5		
Hip Replacement/Reconstruction	17	0.0	3.7		0.0	7.4		5.9	10.4		
Open Reduction of Hip Fracture	12	0.0	6.8		0.0	13.2		0.0	18.5		
Prostatectomy	57	1.8	1.2	1.5	3.5	2.3	2.2	3.5	3.8	2.9	
Cholecystectomy	17	0.0	2.4		0.0	3.5		0.0	4.2		
Hysterectomy	6	0.0	0.1		0.0	0.2		0.0	0.4	,	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



ST ANTHONY HOSPITAL Medicare Provider Number: 170003

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:	
Average age at admission 75.5	5 years Cancer	8.0 %
Proportion female 51.9	9 % Chronic cardiovascular disease	38.3 %
DMISSION SOURCES/TYPES:	Chronic liver disease	1.3 %
Referred by personal or HMO physician 52.7	7 % Chronic renal disease	2.2 %
Transferred from skilled nursing facility 2.5	5 % Chronic pulmonary disease	12.7 %
Admitted for elective procedure 71.2	2 % Cerebrovascular degeneration	2.3 %
Admitted for emergency	0 % Diabetes mellitus	6.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	l :	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	54.2%	Hospital	6.8 Days
State	44.2%	State	7.3 Days
Outside State	1.6%	National	8.6 Days
Total	100.0%		

SOURCE: Health Care Financing Administration (OSCAR)**	- Survey Year 1991
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Ownership/Control Church	Coronary Care Unit Yes
Case Mix Index (CMI) 1.1837	Hospice CareYes
STAFFING:	Intensive Care UnitYes
Medical Residents/Interns 0	Organ Transplant No
Registered Nurses 81	Trauma Center No
Licensed Practical Nurses	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/DrugYes
	RehabilitationNo
	Psychiatric No
	Medicare Swing Beds No

^{**} Except for CMI

^{*} Not used in calculating mortality rates

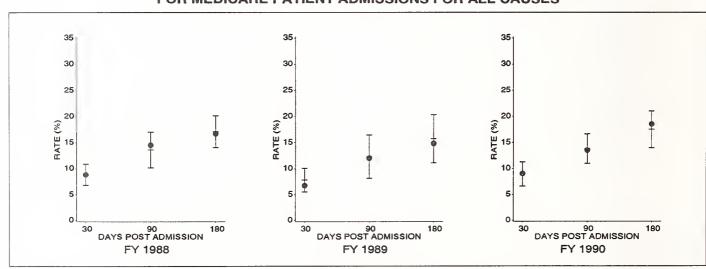
ST CATHERINE HOSPITAL

4TH & WALNUT GARDEN CITY, KS 67846 Medicare Provider Number: 170023

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		3	30 DAY	s	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	720	9.0	8.9	1.2	13.5	13.8	1.4	18.5	17.5	1.8
CONDITIONS:										
Acute Myocardial Infarction	18	27.8	30.7		33.3	33.9		33.3	36.7	
Congestive Heart Failure	40	20.0	14.9		25.0	23.4		32.5	29.7	
Pneumonia/Influenza	30	3.3	9.2		6.7	13.2		6.7	16.1	
Chronic Obstructive Pulmonary Disease	17	5.9	9.2		11.8	15.5		17.6	20.4	
Transient Cerebral Ischemia	0									
Stroke	22	31.8	22.4		40.9	31.8		45.5	36.2	
Hip Fracture	46	4.3	7.7		8.7	13.7		17.4	17.7	
Sepsis	9	33.3	28.4		33.3	37.2		33.3	41.6	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	6	0.0	2.6		0.0	5.7		16.7	9.2	
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	21	0.0	5.7		0.0	10.6		9.5	14.1	
Open Reduction of Hip Fracture	26	7.7	6.0		11.5	10.9		15.4	14.5	
Prostatectomy	45	0.0	0.6		2.2	1.6		2.2	2.9	
Cholecystectomy	17	0.0	2.0		0.0	3.7		0.0	5.1	
Hysterectomy	9	0.0	0.4		0.0	0.9		0.0	1.6	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



ST CATHERINE HOSPITAL Medicare Provider Number: 170023

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	75.4 years	Cancer	9.3 %
Proportion female	51.5 %	Chronic cardiovascular disease	37.4 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.8 %
Referred by personal or HMO physician	38.8 %	Chronic renal disease	2.2 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	37.8 %
Admitred for elective procedure	41.8 %	Cerebrovascular degeneration	2.5 %
Admitted for emergency	18.5 %	Diabetes mellitus	7.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	1:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	49.2%	Hospital	7.3 Days
State	45.7%	State	7.3 Days
Outside State	5.1%	National	8.6 Days
Total	100.0%		

PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 57.0 %	Cardiac Intensive Care No
Ownership/ControlChurch	Comprehensive Geriatric No
Medicare Discharges 26.3 %	Hospice Care No
Case Mix Index (CMI) 1.3017	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant Yes
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns	Alcohol/DrugNo
Registered Nurses	Rehabilitation
Licensed Practical Nurses	Psychlatric Yes
** Except for CMI	Medicare Swing Beds No

^{*} Not used in calculating mortality rates

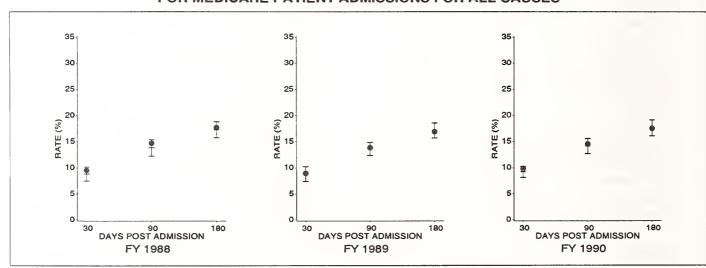
ST FRANCIS HOSPITAL & MEDICAL CENTER

1700 W 7TH ST TOPEKA, KS 66606 Medicare Provider Number: 170016

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
		- 3	30 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3356	9.8	9.2	0.5	14.5	14.1	0.7	17.5	17.6	0.8
CONDITIONS:										
Acute Myocardial Infarction	101	29.7	26.4	5.9	30.7	29.3	5.2	33.7	31.8	4.9
Congestive Heart Failure	111	14.4	13.8	3.3	21.6	21.6	3.9	24.3	27.7	5.2
Pneumonia/Influenza	63	17.5	12.5	8.5	23.8	17.5	7.8	25.4	21.1	6.9
Chronic Obstructive Pulmonary Disease	35	2.9	5.0		5.7	8.8		11.4	12.3	
Transient Cerebral Ischemia	32	3.1	2.0		9.4	4.4		15.6	6.9	
Stroke	99	24.2	22.0	4.6	30.3	28.3	4.8	32.3	32.1	5.1
Hip Fracture	137	4.4	6.8	2.6	13.1	12.0	3.2	19.0	15.4	3.9
Sepsis	28	25.0	23.1		28.6	31.1		32.1	35.6	
PROCEDURES:										
Angioplasty	117	6.0	3.4	3.2	6.8	4.3	3.9	7.7	5.2	4.5
Coronary Artery Bypass Graft	83	7.2	6.5	2.9	12.0	9.0	5.0	12.0	10.1	4.9
Initial Pacemaker Insertion	32	9.4	4.7		12.5	8.3		12.5	11.1	
Carotid Endarterectomy	31	0.0	1.8		3.2	3.2		3.2	4.6	
Hip Replacement/Reconstruction	112	2.7	3.2	1.8	7.1	5.8	2.5	9.8	7.6	3.1
Open Reduction of Hip Fracture	76	1.3	6.1	3.6	7.9	11.2	4.4	14.5	14.6	4.6
Prostatectomy	129	3.9	1.0	2.0	5.4	2.3	2.4	6.2	3.9	2.2
Cholecystectomy	83	3.6	2.3	2.0	4.8	4.2	2.3	7.2	5.7	3.1
Hysterectomy	37	0.0	1.5		0.0	3.3		2.7	5.0	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



ST FRANCIS HOSPITAL & MEDICAL CENTER Medicare Provider Number: 170016

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	74.6 years	Cancer	9.0 %
Proportion female	56.5 %	Chronic cardiovascular disease	38.7 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.7 %
Referred by personal or HMO physician	46.1 %	Chronic renal disease	3.0 %
Transferred from skilled nursing facility	1.3 %	Chronic pulmonary disease	17.0 %
Admitted for elective procedure	2.0 %	Cerebrovascular degeneration	2.9 %
Admitted for emergency	5.1 %	Diabetes mellitus	7.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	62.0%	Hospital	8.3 Days
State	36.1%	State	7.3 Days
Outside State	1.9%	National	8.6 Days
Total	100.0%		

ROFILE:	SPECIALTY SERVICES:
Total Beds 311	Burn Unit N
Occupancy Rate 68.0 %	Cardiac Intensive Care Ye
Ownership/Control Church	Comprehensive Geriatric N
Medicare Discharges 44.7 %	Hospice Care N
Case Mix Index (CMI) 1.5472	Medical/Surgical Intensive Care Ye
TAFFING:	Organ/Tissue Transplant N
Total Number of Physicians 263	Other Intensive Care N
Percent of Physicians Board Certified Specialists	Trauma Center N
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/DrugYe
Registered Nurses	RehabilitationYe
Licensed Practical Nurses 66	PsychiatricN

^{*} Not used in calculating mortality rates

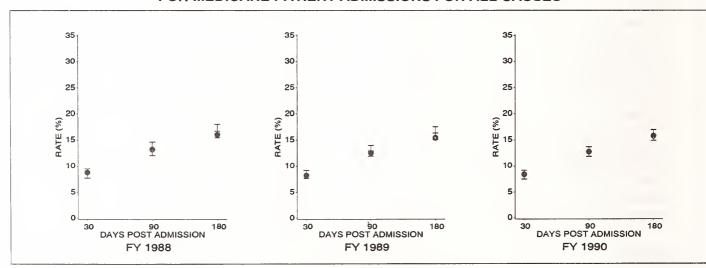
ST FRANCIS REGIONAL MEDICAL CENTER

929 N ST FRANCIS AVE WICHITA, KS 67214 Medicare Provider Number: 170122

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
			30 DAY	S	. 9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD°	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	5117	8.4	8.3	0.4	12.7	12.7	0.5	15.7	15.9	0.5
CONDITIONS:										
Acute Myocardial Infarction	231	22.5	22.5	2.7	25.1	25.8	3.0	27.3	28.5	3.4
Congestive Heart Failure	237	16.9	14.0	2.8	23.6	22.7	3.1	28.7	29.1	3.0
Pneumonia/Influenza	162	14.2	15.5	3.0	21.0	21.7	4.3	25.9	25.6	3.6
Chronic Obstructive Pulmonary Disease	45	13.3	6.9		17.8	12.4		31.1	16.6	
Transient Cerebral Ischemia	38	0.0	1.6		5.3	3.6		5.3	5.8	
Stroke	143	25.9	20.3	4.4	36.4	26.9	6.1	39.2	30.7	5.8
Hip Fracture	131	10.7	6.9	3.5	13.7	12.3	5.3	20.6	16.1	5.7
Sepsis	72	26.4	25.5	5.2	34.7	34.0	7.3	38.9	39.1	8.1
PROCEDURES:										
Angioplasty	254	3.9	3.1	1.4	4.3	4.1	1.5	5.1	5.1	1.7
Coronary Artery Bypass Graft	312	3.5	5.4	1.9	5.8	7.8	2.7	6.4	8.8	2.6
Initial Pacemaker Insertion	127	2.4	2.7	1.5	6.3	5.6	2.1	9.4	8.3	2.6
Carotid Endarterectomy	76	0.0	1.7	2.3	0.0	3.2	3.9	2.6	4.7	3.3
Hip Replacement/Reconstruction	143	4.9	2.8	2.6	7.0	5.3	3.5	9.1	7.1	3.9
Open Reduction of Hip Fracture	67	10.4	6.3	3.8	14.9	11.5	5.7	22.4	15.0	6.5
Prostatectomy	113	2.7	1.2	1.9	4.4	2.7	2.5	5.3	4.4	2.3
Cholecystectomy	75	1.3	3.1	3.2	5.3	5.9	3.9	9.3	8.1	4.3
Hysterectomy	36	0.0	0.3		0.0	0.7		0.0	1.2	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



ST FRANCIS REGIONAL MEDICAL CENTER

Medicare Provider Number: 170122

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	72.7 years	Cancer	7.1 %
Proportion female	52.6 %	Chronic cardiovascular disease	41.0 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.6 %
Referred by personal or HMO physician	56.5 %	Chronic renal disease	7.0 %
Transferred from skilled nursing facility	1.4 %	Chronic pulmonary disease	10.3 %
Admitted for elective procedure	37.1 %	Cerebrovascular degeneration	3.5 %
Admitted for emergency	27.5 %	Diabetes mellitus	9.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

PRIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	52.2%	Hospital	9.0 Days
State	44.4%	State	7.3 Days
Outside State	3.4%	National	8.6 Days
Total	100.0%		

ROFILE:	SPECIALTY SERVICES:
Total Beds 640	Burn UnitYes
Occupancy Rate 72.0 %	Cardiac Intensive CareYes
Ownership/Control Church	Comprehensive Geriatric Yes
Medicare Discharges 34.7 %	Hospice Care No
Case Mix Index (CMI) 1.8134	Medical/Surgical Intensive CareYes
TAFFING:	Organ/Tissue TransplantYes
Total Number of Physicians 344	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center Yes
_	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/DrugYe
Registered Nurses 628	RehabilitationN
Licensed Practical Nurses	Psychiatric Ye

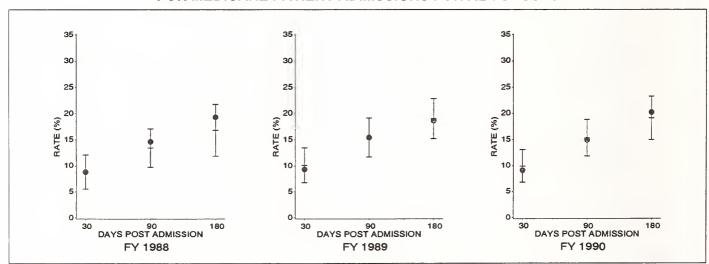
^{*} Not used in calculating mortality rates

ST JOHN HOSPITAL 3500 S 4TH LEAVENWORTH, KS 66048 Medicare Provider Number: 170009

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	овѕ	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	475	9.1	9.9	1.6	14.9	15.3	1.8	20.2	19.1	2.1
CONDITIONS:										
Acute Myocardial Infarction	10	10.0	12.6		20.0	14.9		20.0	17.5	
Congestive Heart Failure	20	5.0	16.3		15.0	25.0		30.0	30.9	
Pneumonia/Influenza	48	12.5	16.8		18.8	23.9		27.1	27.8	
Chronic Obstructive Pulmonary Disease	11	0.0	6.8		0.0	12.2		9.1	16.8	
Transient Cerebral Ischemia	4	0.0	3.6		0.0	8.8		0.0	15.2	
Stroke	18	11.1	17.5		16.7	23.4		27.8	27.5	
Hip Fracture	10	10.0	5.2		20.0	9.7		20.0	13.0	
Sepsis	5	20.0	19.1		40.0	27.0		40.0	31.7	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	1	0.0	10.4		0.0	23.7		0.0	35.4	
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	7	0.0	3.7		14.3	7.0		14.3	9.7	
Open Reduction of Hip Fracture	6	16.7	5.2		16.7	10.3		16.7	14.1	
Prostatectomy	25	0.0	1.1		4.0	2.5		4.0	4.3	
Cholecystectomy	8	0.0	7.4		0.0	13.2		12.5	16.6	
Hysterectomy	5	0.0	8.0		0.0	1.4		0.0	2.2	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



ST JOHN HOSPITAL Medicare Provider Number: 170009

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	76.3 years	Cancer	6.3 %
Proportion female	63.6 %	Chronic cardiovascular disease	26.9 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.5 %
Referred by personal or HMO physician	49.5 %	Chronic renal disease	2.1 %
Transferred from skilled nursing facility	4.0 %	Chronic pulmonary disease	16.4 %
Admitted for elective procedure	7.4 %	Cerebrovascular degeneration	3.2 %
Admitted for emergency	28.4 %	Diabetes mellitus	5.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	81.6%	Hospital	6.9 Days
State	8.8%	State	7.3 Days
Outside State	9.6%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	•••
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 42.0 %	Cardiac Intensive Care No
Ownership/ControlChurch	Comprehensive Geriatric No
Medicare Discharges 34.5 %	Hospice Care No
Case Mix Index (CMI) 1.1682	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Alcohol/Drug No
	Rehabilitation No
Licensed Practical Nurses	Psychiatric No
** Except for CMI	Medicare Swing Beds No

^{*} Not used in calculating mortality rates

ST JOHN PRIMARY CARE HOSPITAL

609 E 1ST ST SAINT JOHN, KS 67576 Medicare Provider Number: 170125

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	28	7.1	9.4	••••	10.7	14.2		10.7	17.7	
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	1	0.0	9.6		0.0	15.2		0.0	20.1	
Pneumonia/Influenza	4	25.0	10.2		25.0	14.1		25.0	17.3	
Chronic Obstructive Pulmonary Disease	1	0.0	2.6		0.0	5.2		0.0	8.1	
Transient Cerebral Ischemia	0									
Stroke	0									
Hip Fracture	1	0.0	3.9		0.0	8.5		0.0	12.4	
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

ST JOHN PRIMARY CARE HOSPITAL Medicare Provider Number: 170125

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	79.3 years	Cancer	0.0 %
Proportion female	67.9 %	Chronic cardiovascular disease	14.3 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	50.0 %	Chronic renal disease	0.0 %
Transferred from skilled nursing facility	7.1 %	Chronic pulmonary disease	7.1 %
Admitted for elective procedure	0.0 %	Cerebrovascular degeneration	7.1 %
Admitted for emergency	3.6 %	Diabetes mellitus	0.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	85.7%	Hospital	4.2 Days
State	14.3%	State	7.3 Days
Outside State	0.0%	National	8.6 Days
Total 1	00.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE: Total Beds	SPECIALTY SERVICES: Burn Unit No Cardiac Intensive Care No Comprehensive Geriatric No Hospice Care No Medical/Surgical Intensive Care No Organ/Tissue Transplant No Other Intensive Care No Trauma Center No OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns	Alcohol/Drug

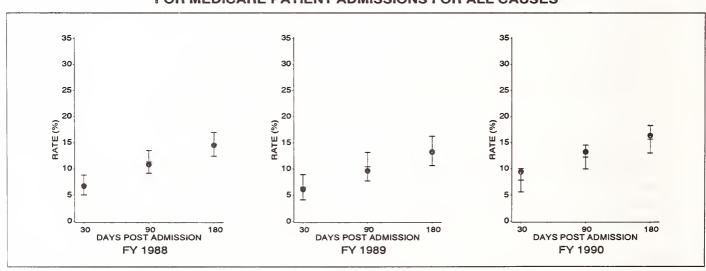
^{*} Not used in calculating mortality rates

ST JOHNS HOSPITAL
139 N PENN ST
SALINA, KS 67401
Medicare Provider Number: 170011

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		3	0 DAY	S	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD°	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	949	9.4	7.8	1.1	13.2	12.2	1.1	16.3	15.6	1.3
CONDITIONS:										
Acute Myocardial Infarction	26	30.8	28.3		34.6	31.0	••••	34.6	33.5	
Congestive Heart Failure	37	21.6	16.9		29.7	26.9		37.8	33.5	
Pneumonia/Influenza	33	15.2	17.7		18.2	24.3		24.2	28.7	
Chronic Obstructive Pulmonary Disease	18	22.2	5.5		22.2	10.4		22.2	14.5	
Transient Cerebral Ischemia	14	0.0	1.5		0.0	3.2		0.0	5.0	
Stroke	25	16.0	18.7		24.0	23.9		28.0	27.4	
Hip Fracture	58	5.2	6.0	3.2	8.6	10.6	4.3	8.6	14.0	5.9
Sepsis	3	33.3	39.5		33.3	51.4		33.3	56.8	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	5	0.0	3.3		0.0	6.8		0.0	10.0	
Carotid Endarterectomy	2	0.0	1.4		0.0	2.6		50.0	3.8	
Hip Replacement/Reconstruction	43	2.3	3.4		9.3	6.1		9.3	8.1	
Open Reduction of Hip Fracture	31	3.2	5.3		3.2	9.8		3.2	13.3	
Prostatectomy	53	0.0	0.9	1.5	0.0	2.0	2.5	1.9	3.5	2.9
Cholecystectomy	42	9.5	2.5		11.9	5.2		14.3	7.5	
Hysterectomy	4	0.0	0.1		0.0	0.3		٥.ى	0.6	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



ST JOHNS HOSPITAL Medicare Provider Number: 170011

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	75.4 years	Cancer	11.3 %
Proportion female	56. 2 %	Chronic cardiovascular disease	31.5 %
DMISSION SOURCES/TYPES:		Chronic liver disease	1.2 %
Referred by personal or HMO physician	6 7. 5 %	Chronic renal disease	1.5 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	14.9 %
Admitted for elective procedure	32.9 %	Cerebrovascular degeneration	3.2 %
Admitted for emergency	33.5 %	Diabetes mellitus	5.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	۷:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	55.3%	Hospital	7.4 Days
State	42.9%	State	7.3 Days
Outside State	1.8%	National	8.6 Days_
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	90
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 47.0 %	Cardiac Intensive Care No
Ownership/Control Church	Comprehensive Gerlatric No
Medicare Discharges 45.7 %	Hospice CareYes
Case Mix Index (CMI) 1.3185	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 98	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns0	Alcohol/DrugYes
Registered Nurses	Rehabilitation No
Licensed Practical Nurses	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

ST JOSEPH HOSPITAL

1100 HIGHLAND DR

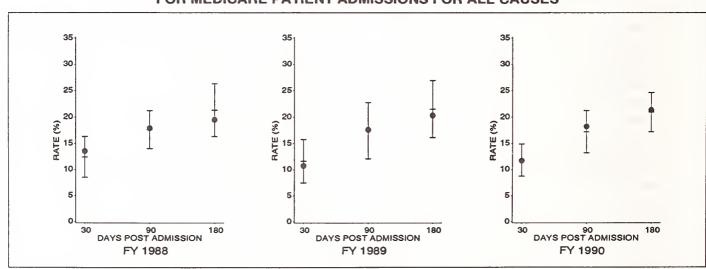
CONCORDIA, KS 66901

Medicare Provider Number: 170095

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
		30 DAYS		S	9	0 DAYS	3	18	180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	494	11.7	11.8	1.5	18.2	17.2	2.0	21.3	20.9	1.9	
CONDITIONS:											
Acute Myocardial Infarction	14	28.6	37.2		42.9	40.7		57.1	43.6		
Congestive Heart Failure	27	22.2	17.0	*****	25.9	25.9		29.6	32.5		
Pneumonia/Influenza	46	21.7	17.8	*****	30.4	23.5		37.0	27.1		
Chronic Obstructive Pulmonary Disease	14	0.0	6.6		14.3	13.1	*****	14.3	18.7		
Translent Cerebral Ischemia	12	0.0	2.1		0.0	5.0		0.0	8.3		
Stroke	20	15.0	24.0		15.0	30.1	*****	25.0	34.3		
Hip Fracture	17	23.5	10.0		35.3	16.9		35.3	21.1		
Sepsis	6	0.0	29.4		0.0	35.8		0.0	39.6		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	6	0.0	4.1		0.0	7.2		16.7	9.9		
Carotid Endarterectomy	1	0.0	1.1		0.0	2.2		0.0	3.7		
Hip Replacement/Reconstruction	5	20.0	8.4	****	20.0	14.5		20.0	18.3		
Open Reduction of Hip Fracture	10	30.0	9.2		30.0	15.8		30.0	19.7		
Prostatectomy	19	0.0	0.7		0.0	1.5		0.0	2.6		
Cholecystectomy	9	22.2	7.6		22.2	14.0		22.2	17.9		
Hysterectomy	5	0.0	0.6		0.0	1.4	*****	C.0	2.4		

^{*} The Standard Deviation (SD) Is not calculated if the number of deaths or cases Is too small for satisfactory estimation.



ST JOSEPH HOSPITAL Medicare Provider Number: 170095

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	78.7 years	Cancer	6.5 %
Proportion female	64.0 %	Chronic cardiovascular disease	44.5 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.4 %
Referred by personal or HMO physician	27.7 %	Chronic renal disease	4.9 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	16.2 %
Admitted for elective procedure	12.1 %	Cerebrovascular degeneration	5.7 %
Admitted for emergency	18.8 %	Diabetes mellitus	4.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

N:	MEDICARE AVERAGE LENGTH OF STAY:	
76.7%	Hospital	6.4 Days
20.6%	State	7.3 Days
2.7%	National	8.6 Days
100.0%		
	76.7% 20.6% 2.7%	76.7% Hospital

PROFILE:	SPECIALTY SERVICES:
Total Beds 53	Burn Unit No
Occupancy Rate 56.0 %	Cardiac Intensive Care No
Ownership/Control	Comprehensive Geriatric No
Medicare Discharges 61.2 %	Hospice Care No
Case Mix Index (CMI) 1.1532	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 14	Other Intensive Care No
Percent of Physicians Board Certified Specialists 57.1 %	Trauma Center No
•	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/DrugNo
Registered Nurses 60	RehabilitationNo
Licensed Practical Nurses	Psychiatric Yes
	Medicare Swing BedsYes

^{*} Not used in calculating mortality rates

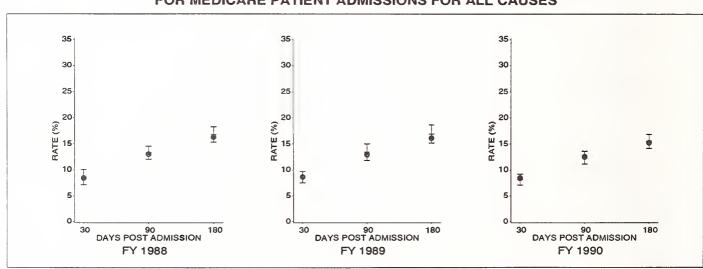
ST JOSEPH MEDICAL CENTER

3600 E HARRY WICHITA, KS 67218 Medicare Provider Number: 170087

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		30 0		S	9	90 DAYS			180 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD°	OBS	PRED	SD*
ALL CAUSES	3160	8.4	8.1	0.5	12.5	12.3	0.6	15.2	15.5	0.7
CONDITIONS:										
Acute Myocardial Infarction	113	26.5	26.1	4.2	30.1	28.8	4.5	31.9	31.3	4.4
Congestive Heart Failure	169	18.3	14.5	4.8	28.4	23.1	4.1	33.1	29.4	4.2
Pneumonia/Influenza	115	9.6	13.4	6.5	13.9	18.3	6.3	19.1	21.5	6.4
Chronic Obstructive Pulmonary Disease	61	11.5	7.4	5.3	14.8	12.8	5.0	14.8	17.1	6.2
Transient Cerebral Ischemia	51	2.0	1.7	2.2	2.0	3.8	3.3	2.0	6.3	4.9
Stroke	92	14.1	18.4	5.4	22.8	24.6	4.8	27.2	28.4	4.8
Hip Fracture	75	8.0	6.9	3.7	12.0	12.2	3.8	13.3	15.8	4.5
Sepsis	26	15.4	23.5		26.9	30.5		34.6	34.7	
PROCEDURES:										
Angioplasty	45	0.0	3.3		2.2	4.2		4.4	5.2	
Coronary Artery Bypass Graft	75	6.7	6.4	3.0	10.7	8.8	3.8	10.7	9.8	3.9
Initial Pacemaker Insertion	24	0.0	4.6		4.2	8.4		12.5	11.3	*****
Carotid Endarterectomy	52	0.0	1.4	2.3	1.9	2.7	2.6	1.9	4.1	4.2
Hip Replacement/Reconstruction	53	1.9	3.0	2.8	3.8	5.6	3.5	3.8	7.5	4.8
Open Reduction of Hip Fracture	46	6.5	6.3		10.9	11.5		13.0	15.1	
Prostatectomy	116	1.7	0.8	1.1	4.3	1.9	2.4	5.2	3.3	2.3
Cholecystectomy	72	8.3	3.3	3.8	9.7	5.5	4.8	12.5	7.1	5.0
Hysterectomy	19	5.3	2.1		5.3	4.5		10.5	6.6	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



ST JOSEPH MEDICAL CENTER Medicare Provider Number: 170087

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	73.7 years	Cancer	5.9 %
Proportion female	56.6 %	Chronic cardiovascular disease	37.2 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.0 %
Referred by personal or HMO physician	49.3 %	Chronic renal disease	2.6 %
Transferred from skilled nursing facility	0.2 %	Chronic pulmonary disease	18.3 %
Admitted for elective procedure	22.7 %	Cerebrovascular degeneration	5.1 %
Admitted for emergency	40.3 %	Diabetes mellitus	10.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N :	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	72.5%	Hospital	8.1 Days
State	24.2%	State	7.3 Days
Outside State	3.3%	National	8.6 Days
Total	100.0%		

PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit
Occupancy Rate 68.0 %	Cardiac Intensive Care Yes
Ownership.Control Private, Non-Profit	Comprehensive Geriatric Yes
Medicare Discharges	Hospice CareYes
Case Mix Index (CMI) 1.3900	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 287	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center Yes
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/DrugYes
Registered Nurses 559	RehabilitationYes
Licensed Practical Nurses 81	Psychiatric Yes
	Medicare Swing Beds No

^{*} Not used in calculating mortality rates

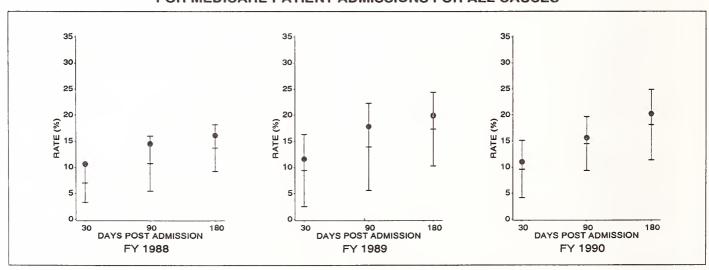
ST LUKE HOSPITAL

1014 E MELVIN MARION, KS 66861 Medicare Provider Number: 170025

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		3	30 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	218	11.0	9.6	2.8	15.6	14.5	2.6	20.2	18.1	3.4
CONDITIONS:										
Acute Myocardial Infarction	5	40.0	24.8		40.0	27.3	•	40.0	29.8	
Congestive Heart Failure	15	26.7	14.7		33.3	22.5		46.7	29.4	
Pneumonia/Influenza	19	15.8	12.5		21.1	17.7		21.1	21.4	
Chronic Obstructive Pulmonary Disease	6	16.7	6.3		16.7	11.8		16.7	15.7	
Transient Cerebral Ischemia	2	0.0	1.3		0.0	2.8		0.0	4.2	
Stroke	14	21.4	20.0		28.6	27.6		35.7	31.4	
Hip Fracture	7	0.0	4.8		0.0	9.0		0.0	12.7	
Sepsis	4	0.0	32.3		0.0	37.0		0.0	41.2	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	2	0.0	1.9		0.0	3.6		50.0	5.5	
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	4	0.0	3.7		0.0	6.5		0.0	9.0	
Open Reduction of Hip Fracture	3	0.0	4.2		0.0	8.6	••••	0.0	12.8	
Prostatectomy	3	0.0	0.5		0.0	1.4	••••	0.0	2.7	
Cholecystectomy	6	0.0	2.1		0.0	3.3		0.0	4.2	
Hysterectomy	1	0.0	0.1	••••	0.0	0.2		0.0	0.4	,

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.



ST LUKE HOSPITAL

Medicare Provider Number: 170025

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:
Average age at admission 77.6 years	Cancer 3.7 %
Proportion female 55.0 %	Chronic cardiovascular disease 30.3 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.9 %
Referred by personal or HMO physician 40.8 %	Chronic renal disease 2.8 %
Transferred from skilled nursing facility 0.0 %	Chronic pulmonary disease 14.7 %
Admitted for elective procedure 10.1 %	Cerebrovascular degeneration 9.2 %
Admitted for emergency	Diabetes mellitus 7.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	V:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	81.4%	Hospital	4.9 Days
State	16.1%	State	7.3 Days
Outside State	2.5%	National	8.6 Days
Total	100.0%		

ROFILE:	SPECIALTY SERVICES:
Total Beds25	Burn Unit No
Occupancy Rate 32.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 61.5 %	Hospice Care No
Case Mix Index (CMI) 1.1704	Medical/Surgical Intensive CareYes
TAFFING:	Organ/Tissue Transplant No
Total Number of Physicians4	Other Intensive Care No
Percent of Physicians Board Certified Specialists75.0 %	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns	Alcohol/Drug No
Registered Nurses	RehabilitationNo
Licensed Practical Nurses 5	Psychiatric No

^{*} Not used in calculating mortality rates

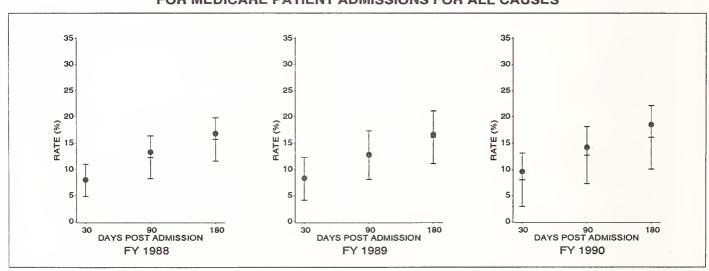
ST LUKES HOSPITAL 1323 NORTH A STREET WELLINGTON, KS 67152 Medicare Provider Number: 170039

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)									
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	3
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	302	9.6	8.0	2.6	14.2	12.7	2.7	18.5	16.1	3.0
CONDITIONS:										
Acute Myocardial Infarction	10	20.0	23.8		20.0	27.2	*****	30.0	30.5	
Congestive Heart Failure	15	13.3	12.5		20.0	20.6		26.7	27.2	
Pneumonia/Influenza	5	20.0	10.0		20.0	14.1		20.0	17.4	
Chronic Obstructive Pulmonary Disease	1	0.0	4.8		0.0	10.0		0.0	14.0	
Transient Cerebral Ischemia	9	11.1	1.5		22.2	3.8		22.2	6.9	
Stroke	19	26.3	15.6		31.6	21.2		36.8	25.2	
Hip Fracture	6	0.0	5.7		0.0	10.1		33.3	13.1	
Sepsis	4	0.0	20.1		50.0	29.2		50.0	35.3	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	5	0.0	2.0		0.0	3.6		0.0	5.0	
Open Reduction of Hip Fracture	3	0.0	6.5		0.0	11.9		33.3	15.5	
Prostatectomy	10	0.0	0.9		0.0	2.0		0.0	3.4	
Cholecystectomy	2	0.0	0.6		0.0	1.1		0.0	1.5	
Hysterectomy	1	0.0	0.3		0.0	0.7		0.0	1.3	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST LUKES HOSPITAL Medicare Provider Number: 170039

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	78.4 vears	Cancer	5.6 %
Proportion female	•	Chronic cardiovascular disease	
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.7 %
Referred by personal or HMO physician	45.4 %	Chronic renal disease	3.0 %
Transferred from skilled nursing facility	0.3 %	Chronic pulmonary disease	13.2 %
Admitted for elective procedure	67.9 %	Cerebrovascular degeneration	3.0 %
Admitted for emergency	2.3 %	Diabetes mellitus	6.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

RIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	82.0%	Hospital	4.6 Days
State	14.1%	State	7.3 Days
Outside State	3.9%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 40.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 48.3 %	Hospice Care No
Case Mix Index (CMI) 1.0629	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 10	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
· · · · · · · · · · · · · · · · · · ·	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns	Alcohol/DrugYes
Registered Nurses	Rehabilitation No
Licensed Practical Nurses 7	Psychiatric No
** Except for CMI	Medicare Swing BedsYes

^{*} Not used in calculating mortality rates

ST MARYS HEALTH CENTER OF EMPORIA 15TH & STATE STS EMPORIA, KS 66801

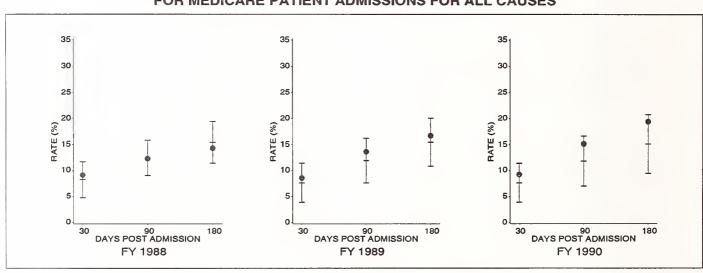
Medicare Provider Number: 170007

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	-										
		30 DAYS			9	90 DAYS			180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	284	9.2	7.6	1.9	15.1	11.8	2.4	19.4	15.1	2.8	
CONDITIONS:											
Acute Myocardial Infarction	11	36.4	28.1		45.5	31.3		54.5	34.7		
Congestive Heart Failure	10	10.0	16.9	••••	20.0	26.8		40.0	33.9		
Pneumonia/Influenza	28	14.3	13.9	••••	21.4	19.2		32.1	23.2		
Chronic Obstructive Pulmonary Disease	3	0.0	13.3		0.0	22.4		0.0	28.6		
Transient Cerebral Ischemia	1	0.0	4.5		0.0	11.2		0.0	18.6		
Stroke	5	0.0	15.6	••••	0.0	22.2		20.0	26.5		
Hip Fracture	13	7.7	4.3		15.4	8.0		15.4	10.9		
Sepsis	1	100.0	28.0	••••	100.0	45.5		100.0	53.8		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	1	0.0	1.8		0.0	3.1		0.0	4.4		
Carotid Endarterectomy	2	0.0	1.3		0.0	2.6		0.0	3.7		
Hip Replacement/Reconstruction	10	10.0	3.4		20.0	6.8		20.0	9.8		
Open Reduction of Hip Fracture	5	20.0	3.9		20.0	7.4		20.0	10.0		
Prostatectomy	0										
Cholecystectomy	4	0.0	1.2	•••••	0.0	2.1		0.0	2.7		
Hysterectomy	2	0.0	0.0		0.0	0.1		0.0	0.2	*****	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST MARYS HEALTH CENTER OF EMPORIA Medicare Provider Number: 170007

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	78.3 years	Cancer	4.6 %
Proportion female	64.8 %	Chronic cardiovascular disease	34.2 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.4 %
Referred by personal or HMO physician	86.6 %	Chronic renal disease	1.8 %
Transferred from skilled nursing facility	1.4 %	Chronic pulmonary disease	11.6 %
Admitted for elective procedure	58.5 %	Cerebrovascular degeneration	8.1 %
Admitted for emergency	32.7 %	Diabetes mellitus	4.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSIO	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	69.2%	Hospital	7.4 Days
State	30.1%	State	7.3 Days
Outside State	0.7%	National	8.6 Days
Total	100.0%		

ROFILE:	SPECIALTY SERVICES:
Total Beds 50	Burn Unit No
Occupancy Rate 29.0 %	Cardiac Intensive Care No
Ownership/ControlChurch	Comprehensive Gerlatric N
Medicare Discharges 58.2 %	Hospice Care N
Case Mix Index (CMI) 1.2084	Medical/Surgical Intensive Care Ye
TAFFING:	Organ/Tissue Transplant N
Total Number of Physicians27	Other Intensive Care N
Percent of Physicians Board Certified Specialists	Trauma Center N
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/DrugYe
Registered Nurses	RehabilitationN
Licensed Practical Nurses 17	Psychiatric N

^{*} Not used in calculating mortality rates

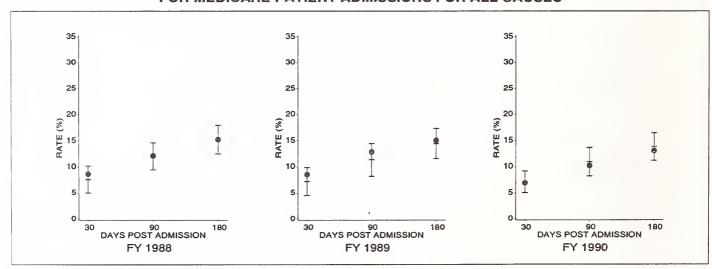
ST MARYS HOSPITAL 1823 COLLEGE AVE MANHATTAN, KS 66502 Medicare Provider Number: 170142

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	ORTALIT	Y RATE	S (%)			
		- 3	30 DAY	S	9	0 DAYS	3	18	0 DAYS	•
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	806	6.9	7.1	1.0	10.2	10.9	1.4	13.0	13.8	1.3
CONDITIONS:										
Acute Myocardial Infarction	21	19.0	24.2		19.0	28.2	•••••	28.6	31.1	
Congestive Heart Failure	22	22.7	14.6		40.9	23.6		45.5	30.5	
Pneumonia/Influenza	48	10.4	16.6		12.5	22.6		16.7	26.6	
Chronic Obstructive Pulmonary Disease	5	20.0	5.4		40.0	11.3		60.0	16.7	
Transient Cerebral Ischemla	14	0.0	2.1		0.0	4.8		0.0	7.5	
Stroke	29	13.8	19.0		17.2	26.1		24.1	30.1	
Hip Fracture	47	4.3	6.1		4.3	10.9		8.5	14.2	
Sepsis	4	25.0	6.1		25.0	9.7		25.0	12.3	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	9	0.0	1.2		0.0	2.4		11.1	3.7	
Hip Replacement/Reconstruction	37	2.7	2.5		2.7	4.5		2.7	6.1	
Open Reduction of Hip Fracture	4	0.0	5.3		0.0	8.6		25.0	10.9	
Prostatectomy	68	0.0	0.7	1.2	0.0	1.6	2.1	1.5	2.8	2.
Cholecystectomy	19	0.0	2.0		0.0	3.5		0.0	4.8	
Hysterectomy	11	0.0	0.2		0.0	0.4		0.0	0.7	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST MARYS HOSPITAL Medicare Provider Number: 170142

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	76.0 years	Cancer	7.3 %
Proportion female	56.7 %	Chronic cardiovascular disease	33.6 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.4 %
Referred by personal or HMO physician	57.9 %	Chronic renal disease	0.5 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	11.9 %
Admitted for elective procedure	49.3 %	Cerebrovascular degeneration	4.5 %
Admitted for emergency	35.7 %	Diabetes mellitus	6.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:	MEDICARE AVERAGE LENGTH OF STAY:
County/City	6 Hospital 7.5 Days
State	% State 7.3 Days
Outside State	6 National 8.6 Days
Total	6

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds 85	Burn Unit No
Occupancy Rate 51.0 %	Cardiac Intensive Care No
Ownership/ControlChurch	Comprehensive Gerlatric No
Medicare Discharges 40.0 %	Hospice Care No
Case Mix Index (CMI) 1.2086	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 58	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns	Alcohol/DrugNo
Registered Nurses	Rehabilitation No
Licensed Practical Nurses 14	Psychiatric Yes
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

STANTON COUNTY HOSPITAL

404 NORTH CHESTNUT
JOHNSON, KS 67855
Medicare Provider Number: 170117

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				M	ORTALIT	YRATE	S (%)			
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD°	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	48	12.5	10.5		20.8	16.2		20.8	20.3	
CONDITIONS:										
Acute Myocardial Infarction	1	100.0	14.0		100.0	19.8		100.0	23.7	
Congestive Heart Failure	0									
Pneumonia/Influenza	11	18.2	21.6		27.3	30.2		27.3	35.5	
Chronic Obstructive Pulmonary Disease	2	0.0	2.3		0.0	5.0		0.0	8.0	*****
Transient Cerebral Ischemia	0									
Stroke	2	50.0	13.4		50.0	18.7		50.0	22.7	
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

STANTON COUNTY HOSPITAL

Medicare Provider Number: 170117

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	78.1 vears	Cancer	10.4 %
Proportion female	-	Chronic cardiovascular disease	
DMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	70.8 %	Chronic renal disease	8.3 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	31.3 %
Admitted for elective procedure	93.8 %	Cerebrovascular degeneration	2.1 %
Admitted for emergency	0.0 %	Diabetes mellitus	10.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	66.3%	Hospital	5.5 Days
State	7.0%	State	7.3 Days
Outside State	26.7%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 58.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric Yes
Medicare Discharges 27.6 %	Hospice Care No
Case Mix Index (CMI) 0.9845	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians 3	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns	Alcohol/DrugNo
Tioglotorod rearesonment	Rehabilitation No
Licensed Practical Nurses	Psychiatric No
** Except for CMI	Medicare Swing Beds Yes

^{*} Not used in calculating mortality rates

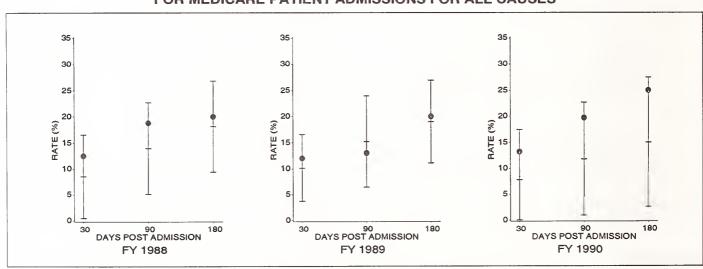
STEVENS COUNTY HOSPITAL
1006 S JACKSON
HUGOTON, KS 67951
Medicare Provider Number: 170089

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				М	ORTALIT	Y RATE	S (%)			
		3	30 DAY	S	9	0 DAYS	3	18	0 DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD°	OBS	PRED	SD*
ALL CAUSES	76	13.2	7.8	4.8	19.7	11.8	5.4	25.0	15.0	6.2
CONDITIONS:										
Acute Myocardial Infarction	2	100.0	37.3		100.0	43.9		100.0	46.9	
Congestive Heart Failure	2	50.0	11.8		50.0	17.3		50.0	21.7	
Pneumonia/Influenza	14	21.4	11.9		28.6	16.3		28.6	19.4	
Chronic Obstructive Pulmonary Disease	4	0.0	2.9		0.0	6.1		0.0	9.1	
Transient Cerebral Ischemia	1	0.0	7.6		0.0	19.9		100.0	34.9	
Stroke	5	20.0	12.1		40.0	16.2		60.0	19.2	
Hip Fracture	2	0.0	7.3		0.0	12.9		0.0	16.8	
Sepsis	1	0.0	14.4		0.0	22.8		100.0	29.0	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	1	0.0	1.7		0.0	2.8		0.0	3.8	*****
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



STEVENS COUNTY HOSPITAL Medicare Provider Number: 170089

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	77.6 years	Cancer	5.3 %
Proportion female	50.0 %	Chronic cardiovascular disease	27.6 %
DMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physiclan	50.0 %	Chronic renal disease	3.9 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	27.6 %
Admitted for elective procedure	64.5 %	Cerebrovascular degeneration	1.3 %
Admitted for emergency	32.9 %	Diabetes mellitus	0.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

5.8 Days
7.3 Days
8.6 Days

ROFILE:	SPECIALTY SERVICES:
Total Beds 17	Burn Unit No
Occupancy Rate 23.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Gerlatric No
Medicare Discharges 47.7 %	Hospice Care No
Case Mix Index (CMI) 0.9872	Medical/Surgical Intensive Care No
TAFFING:	Organ/Tissue Transplant No
Total Number of Physicians2	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/Drug
Registered Nurses9	RehabilitationNo
Licensed Practical Nurses 3	Psychiatric

^{*} Not used in calculating mortality rates

STORMONT VAIL REGIONAL MEDICAL CENTER

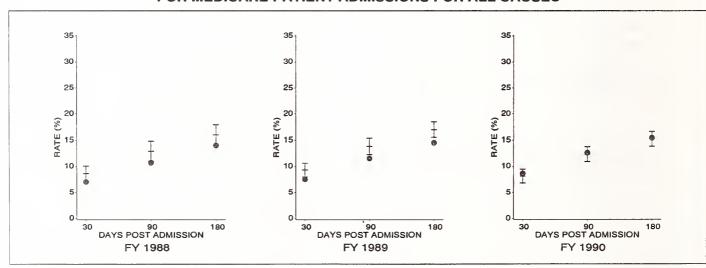
1500 SW 10TH ST TOPEKA, KS 66604 Medicare Provider Number: 170086

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)										
			30 DAY	S	9	0 DAYS	3	18	180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	2759	8.6	8.1	0.7	12.6	12.3	0.7	15.4	15.2	0.7	
CONDITIONS:											
Acute Myocardial Infarction	105	19.0	26.5	6.7	23.8	29.4	6.5	24.8	31.8	6.5	
Congestive Heart Failure	126	19.8	14.4	5.1	27.0	22.5	5.4	35.7	28.4	5.7	
Pneumonia/Influenza	91	16.5	15.0	4.1	25.3	20.6	6.6	29.7	24.4	7.7	
Chronic Obstructive Pulmonary Disease	18	5.6	7.9		22.2	13.4		27.8	17.6		
Transient Cerebral Ischemia	26	3.8	1.6		15.4	3.7		15.4	6.2		
Stroke	104	21.2	20.7	4.8	24.0	28.2	7.0	29.8	32.3	7.3	
Hip Fracture	120	5.8	6.3	2.3	10.8	11.5	3.2	15.8	15.2	3.7	
Sepsis	22	18.2	20.0		22.7	26.4		22.7	30.8		
PROCEDURES:											
Angioplasty	92	3.3	3.5	2.0	4.3	4.6	2.5	5.4	5.7	2.9	
Coronary Artery Bypass Graft	82	7.3	6.4	3.0	9.8	8.7	3.2	11.0	9.6	3.5	
Initial Pacemaker Insertion	29	6.9	3.2		10.3	6.0		10.3	8.5		
Carotid Endarterectomy	38	2.6	1.9		2.6	3.5		2.6	5.1		
Hip Replacement/Reconstruction	123	2.4	2.5	1.5	3.3	4.7	2.2	6.5	6.4	2.5	
Open Reduction of Hip Fracture	69	4.3	5.9	3.2	8.7	11.1	4.3	13.0	14.7	4.6	
Prostatectomy	137	0.7	1.0	0.9	2.2	2.4	1.6	2.2	4.1	2.2	
Cholecystectomy	55	0.0	2.4		0.0	4.3		0.0	5.5		
Hysterectomy	28	0.0	0.5		0.0	1.1		7.1	1.8		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



STORMONT VAIL REGIONAL MEDICAL CENTER Medicare Provider Number: 170086

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission 75.0 years	Cancer 6.3 %
Proportion female 56.7 %	Chronic cardiovascular disease 37.9 %
ADMISSION SOURCES/TYPES:	Chronic liver disease 0.4 %
Referred by personal or HMO physician 19.7 %	Chronic renal disease 1.1 %
Transferred from skilled nursing facility 0.0 %	Chronic pulmonary disease 14.0 %
Admitted for elective procedure 19.8 %	Cerebrovascular degeneration 5.3 %
Admitted for emergency 24.8 %	Diabetes mellitus 5.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

County/City	61.3%	Hospital	8.5 Day
State	36.5%	State	7.3 Day
Outside State	2.2%	National	8.6 Day
Total	100.0%		

ROFILE:	SPECIALTY SERVICES:
Total Beds 350	Burn Unit N
Occupancy Rate 61.0 %	Cardiac Intensive Care Ye
Ownership.Control Private, Non-Profit	Comprehensive Gerlatric Ye
Medicare Discharges 32.9 %	Hospice Care
Case Mix Index (CMI) 1.5737	Medical/Surgical Intensive CareYe
TAFFING:	Organ/Tissue Transplant N
Total Number of Physicians 214	Other Intensive Care N
Percent of Physicians Board Certified Specialists	Trauma Center N
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/Drug
Registered Nurses	Rehabilitation
Licensed Practical Nurses 55	Psychiatric Ye

^{*} Not used in calculating mortality rates

SUSAN B ALLEN MEMORIAL HOSPITAL

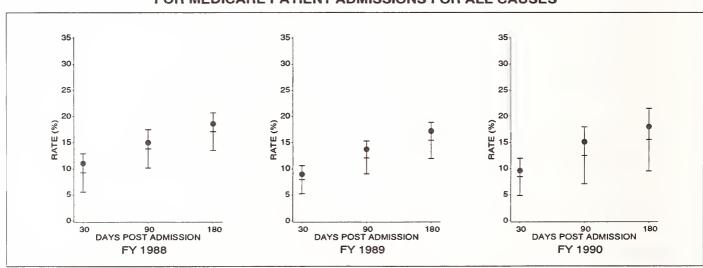
720 W CENTRAL ST EL DORADO, KS 67042 Medicare Provider Number: 170017

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				M	ORTALIT	YRATE	S (%)			
_		3	BO DAY	s	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	523	9.6	8.4	1.8	15.1	12.5	2.7	18.0	15.5	3.0
CONDITIONS:										
Acute Myocardial Infarction	19	10.5	27.8		15.8	31.0		21.1	33.5	
Congestive Heart Failure	33	21.2	15.7		36.4	24.6		42.4	31.4	
Pneumonia/Influenza	29	31.0	15.0		34.5	20.6		37.9	24.6	
Chronic Obstructive Pulmonary Disease	6	0.0	6.5		0.0	11.3		0.0	15.1	
Transient Cerebral Ischemia	5	0.0	1.8	••••	0.0	4.2		0.0	6.7	
Stroke	22	18.2	18.7	••••	27.3	24.5		27.3	28.3	
Hip Fracture	17	11.8	6.7		11.8	11.7		11.8	15.2	
Sepsis	8	25.0	30.0	•	37.5	38.1		37.5	43.3	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	22	9.1	3.1		9.1	5.5		9.1	7.2	
Open Reduction of Hip Fracture	8	0.0	4.8	••••	0.0	8.9		0.0	12.1	
Prostatectomy	12	0.0	0.6	••••	0.0	1.4		0.0	2.5	
Cholecystectomy	12	0.0	2.1		0.0	3.9		0.0	4.9	
Hysterectomy	3	0.0	0.4	••••	0.0	0.8	••••	0.0	1.2	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SUSAN B ALLEN MEMORIAL HOSPITAL Medicare Provider Number: 170017

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	77.6 years	Cancer	3.4 %
Proportion female	62.0 %	Chronic cardiovascular disease	35.9 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.6 %
Referred by personal or HMO physician	46.3 %	Chronic renal disease	2.1 %
Transferred from skilled nursing facility	0.6 %	Chronic pulmonary disease	14.7 %
Admitted for elective procedure	18.7 %	Cerebrovascular degeneration	3.8 %
Admitted for emergency	2.1 %	Diabetes mellitus	4.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	88.5%	Hospital	6.2 Days
State	10.3%	State	7.3 Days
Outside State	1.2%	National	8.6 Days
Total	100.0%		

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 19	990
PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 36.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 53.2 %	Hospice Care No
Case Mix Index (CMI) 1.1560	Medical/Surgical Intensive Care Yes
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns	Alcohol/Drug No
Registered Nurses	Rehabilitation No
Licensed Practical Nurses	Psychlatric No
	Medicare Swing BedsYes
** Except for CMI	•

^{*} Not used in calculating mortality rates

TREGO COUNTY-LEMKE MEMORIAL HOSPITAL

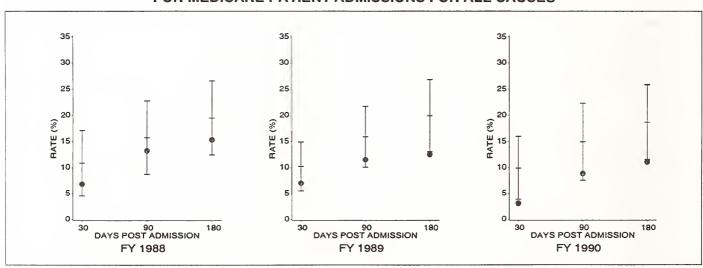
320 N 13TH ST WAKEENEY, KS 67672 Medicare Provider Number: 170077

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)											
		3	0 DAY	S	9	0 DAYS	3	18	0 DAYS	;		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*		
ALL CAUSES	228	3.1	9.9	3.0	8.8	14.9	3.7	11.0	18.7	3.6		
CONDITIONS:												
Acute Myocardial Infarction	8	12.5	26.2		37.5	29.3		37.5	32.8			
Congestive Heart Failure	5	0.0	16.1		0.0	25.4		0.0	31.4			
Pneumonia/Influenza	29	3.4	15.1		6.9	21.7		10.3	26.3			
Chronic Obstructive Pulmonary Disease	4	0.0	7.3		0.0	13.1		0.0	17.7			
Transient Cerebral Ischemia	4	0.0	0.9		0.0	2.4		0.0	4.1			
Stroke	7	0.0	14.1		14.3	18.9		14.3	22.5			
Hip Fracture	0											
Sepsis	1	0.0	18.3		0.0	21.4		0.0	24.6			
PROCEDURES:												
Angioplasty	0											
Coronary Artery Bypass Graft	0											
Initial Pacemaker Insertion	0											
Carotid Endarterectomy	0											
Hip Replacement/Reconstruction	0											
Open Reduction of Hip Fracture	0											
Prostatectomy	0											
Cholecystectomy	3	0.0	0.6		0.0	1.3		0.0	1.9			
Hysterectomy	1	0.0	0.2	•••••	0.0	0.4		0.0	0.7			

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



TREGO COUNTY-LEMKE MEMORIAL HOSPITAL Medicare Provider Number: 170077

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	77.5 years	Cancer	7.5 %
Proportion female	62.7 %	Chronic cardiovascular disease	36.4 %
DMISSION SOURCES/TYPES:		Chronic liver disease	0.9 %
Referred by personal or HMO physician	91.2 %	Chronic renal disease	1.3 %
Transferred from skilled nursing facility	0.4 %	Chronic pulmonary disease	8.3 %
Admitted for elective procedure	0.0 %	Cerebrovascular degeneration	4.8 %
Admitted for emergency	0.0 %	Diabetes mellitus	9.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

State	7.3 Days
National	8.6 Days

PROFILE:	SPECIALTY SERVICES:
Total Beds 72	Burn Unit No
Occupancy Rate 72.0 %	Cardiac Intensive Care No
Ownership.Control Private, Non-Profit	Comprehensive Geriatric No
Medicare Discharges 60.7 %	Hospice Care No
Case Mix Index (CMI) 1.0334	Medical/Surgical Intensive CareNo
STAFFING:	Organ/Tissue Transplant N
Total Number of Physicians 8	Other Intensive Care N
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center N
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/DrugN
Registered Nurses	RehabilitationN
Licensed Practical Nurses 1	Psychiatric N
	Medicare Swing Beds Ye

^{*} Not used in calculating mortality rates

UNIVERSITY OF KANSAS MEDICAL CENTER

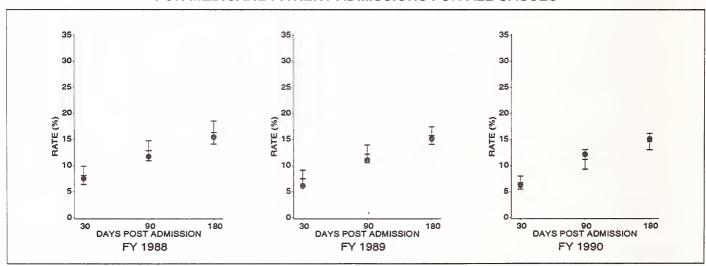
39TH & RAINBOW BLVD KANSAS CITY, KS 66103 Medicare Provider Number: 170040

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
			30 DAY	S	9	0 DAYS	3	18	0 DAYS	>	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	2013	6.2	6.7	0.6	12.1	11.1	0.9	15.0	14.5	0.8	
CONDITIONS:											
Acute Myocardial Infarction	23	26.1	24.7		30.4	27.7		30.4	30.3		
Congestive Heart Failure	72	11.1	12.9	6.2	20.8	21.3	5.2	25.0	27.1	5.7	
Pneumonia/Influenza	45	8.9	12.8		15.6	18.0		26.7	21.4		
Chronic Obstructive Pulmonary Disease	23	4.3	5.7		21.7	10.9		26.1	15.0		
Transient Cerebral Ischemia	13	0.0	1.2		7.7	2.6		7.7	4.1		
Stroke	47	29.8	22.9		36.2	28.7		42.6	32.4		
Hip Fracture	17	11.8	5.2		23.5	9.7		23.5	13.2		
Sepsis	11	18.2	33.5		45.5	43.2		63.6	48.3		
PROCEDURES:											
Angioplasty	9	0.0	1.1		0.0	2.0		0.0	3.1		
Coronary Artery Bypass Graft	27	0.0	3.3		3.7	4.7		7.4	5.4		
Initial Pacemaker Insertion	6	0.0	1.7		0.0	3.5		0.0	5.1		
Carotid Endarterectomy	5	0.0	1.6		0.0	3.0		0.0	4.5		
Hip Replacement/Reconstruction	36	0.0	1.3		5.6	2.4		5.6	3.4		
Open Reduction of Hip Fracture	7	14.3	4.9	*****	14.3	9.5		14.3	12.9	••••	
Prostatectomy	83	0.0	0.5	1.1	1.2	1.3	1.5	3.6	2.4	2.0	
Cholecystectomy	24	0.0	2.2		4.2	4.7	••••	12.5	6.9		
Hysterectomy	15	6.7	0.5		6.7	1.3		6.7	2.3		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



UNIVERSITY OF KANSAS MEDICAL CENTER Medicare Provider Number: 170040

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	88.4 years	Cancer	11.8 %
Proportion female	19.9 %	Chronic cardiovascular disease	23.3 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.2 %
Referred by personal or HMO physician 5	53.7 %	Chronic renal disease	5.3 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	10.6 %
Admitted for elective procedure 5	8.3 %	Cerebrovascular degeneration	4.3 %
Admitted for emergency	23.7 %	Diabetes mellitus	6.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	N:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	25.4%	Hospital	8.4 Days
State	40.8%	State	7.3 Days
Outside State	33.8%	National	8.6 Days
Total	100.0%		

PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit Yes
Occupancy Rate 70.0 %	Cardiac Intensive Care Yes
Ownership/Control State Government	Comprehensive Geriatric Yes
Medicare Discharges 24.0 %	Hospice Care No
Case Mix Index (CMI) 1.3994	Medical/Surgical Intensive CareYes
STAFFING:	Organ/Tissue TransplantYes
Total Number of Physicians 350	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center Yes
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns	Alcohol/DrugN
Registered Nurses	RehabilitationYe
Licensed Practical Nurses	PsychiatricYe
* Except for CMI	Medicare Swing Beds No

^{*} Not used in calculating mortality rates

WAMEGO CITY HOSPITAL

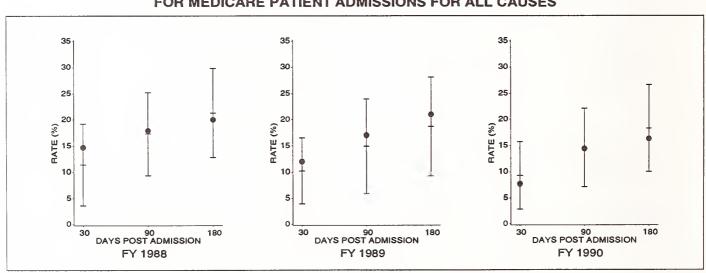
711 GENN DR WAMEGO, KS 66547 Medicare Provider Number: 170128

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				МС	ORTALIT	Y RATE	S (%)			
		30 DAYS			9	0 DAYS	3	180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	104	7.7	9.3	3.2	14.4	14.6	3.7	16.3	18.3	4.1
CONDITIONS:										
Acute Myocardial Infarction	1	0.0	21.3		0.0	24.5		0.0	28.6	
Congestive Heart Failure	3	0.0	13.0		0.0	20.5		0.0	25.4	
Pneumonia/Influenza	17	17.6	13.0		23.5	18.5		23.5	22.2	
Chronic Obstructive Pulmonary Disease	3	0.0	5.8		33.3	10.8		33.3	14.1	
Transient Cerebral Ischemia	3	0.0	1.1		0.0	2.6		0.0	4.4	
Stroke	7	0.0	17.9		14.3	24.2		14.3	27.8	
Hip Fracture	1	0.0	8.6		0.0	14.7		0.0	18.0	
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WAMEGO CITY HOSPITAL

Medicare Provider Number: 170128

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	77.8 years	Cancer	5.7 %
Proportion female	62.9 %	Chronic cardiovascular disease	29.5 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.0 %
Referred by personal or HMO physician	81.0 %	Chronic renal disease	1.0 %
Transferred from skilled nursing facility	1.0 %	Chronic pulmonary disease	27.6 %
Admitted for elective procedure	1.9 %	Cerebrovascular degeneration	1.9 %
Admitted for emergency	8.6 %	Diabetes mellitus	9.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION	٧:	MEDICARE AVERAGE LENGTH OF STAY:	
County/City	81.8%	Hospital	4.5 Days
State	18.2%	State	7.3 Days
Outside State	0.0%	National	8.6 Days
Total	100.0%		

PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 23.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 66.7 %	Hospice Care No
Case Mix Index (CMI) 0.9692	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists	Trauma Center No
·	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/DrugNo
Registered Nurses 4	Rehabilitation
Licensed Practical Nurses 2	
	Psychiatric No

^{*} Not used in calculating mortality rates

WASHINGTON COUNTY HOSPITAL

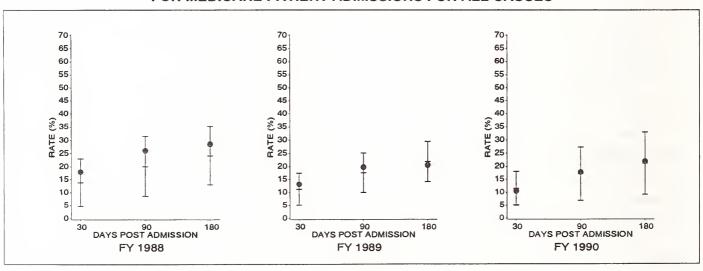
304 EAST 3RD ST WASHINGTON, KS 66968 Medicare Provider Number: 170076

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	DRTALIT	Y RATE	S (%)			
		- 3	O DAY	S	_ 9	0 DAYS	3	18	0 DAYS	>
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	124	10.5	11.5	3.2	17.7	17.0	5.1	21.8	21.0	6.0
CONDITIONS:										
Acute Myocardial Infarction	3	0.0	20.7		0.0	24.5		0.0	27.6	
Congestive Heart Failure	3	0.0	12.7		33.3	20.5		33.3	27.8	
Pneumonia/Influenza	35	5.7	15.3		14.3	21.2	*****	22.9	25.2	
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	1	0.0	0.7		0.0	1.8		0.0	3.1	
Stroke	8	12.5	14.0		25.0	19.0		37.5	22.4	
Hip Fracture	5	0.0	4.4		0.0	8.9		0.0	12.4	
Sepsis	1	0.0	11.7		0.0	17.2		0.0	21.2	
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	4	0.0	4.0		0.0	8.4		0.0	12.1	
Prostatectomy	0									
Cholecystectomy	3	0.0	0.8		0.0	1.8		0.0	2.8	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WASHINGTON COUNTY HOSPITAL Medicare Provider Number: 170076

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	82.4 years	Cancer	8.9 %
Proportion female	68.5 %	Chronic cardiovascular disease	29.0 %
MISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	93.5 %	Chronic renal disease	0.8 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	8.1 %
Admitted for elective procedure	3.2 %	Cerebrovascular degeneration	12.1 %
Admitted for emergency	0.8 %	Diabetes mellitus	3.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

	97.1%	Hospital	7.5 Day
te	2.3%	State	7.3 Day
side State	0.6%	National	8.6 Day
al			3.0

ROFILE:	SPECIALTY SERVICES:
Total Beds27	Burn Unit No
Occupancy Rate 37.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Gerlatric No
Medicare Discharges 58.3 %	Hospice Care No
Case Mix index (CMI) 1.1513	Medical/Surgical Intensive Care No
TAFFING:	Organ/Tissue Transplant No
Total Number of Physicians3	Other intensive Care No
Percent of Physicians Board Certified Specialists100.0 %	Trauma Center No
Medical Residents/Interns 0	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
	Aicohoi/DrugNo
	Rehabilitation No
Licensed Practical Nurses 3	Psychiatric N

^{*} Not used in calculating mortality rates

WELLINGTON HOSPITAL

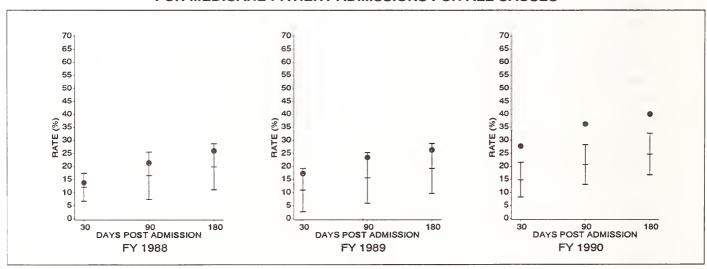
924 S WASHINGTON AVE WELLINGTON, KS 67152 Medicare Provider Number: 170140

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)										
		:	30 DAY	S	9	DAYS	3	18	0 DAYS	;		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD°		
ALL CAUSES	130	27.7	14.8	3.3	36.2	20.6	3.8	40.0	24.6	4.0		
CONDITIONS:												
Acute Myocardial Infarction	7	57.1	26.3		71.4	29.7		71.4	33.0			
Congestive Heart Failure	7	14.3	16.1		28.6	26.6		42.9	34.8			
Pneumonia/Influenza	19	36.8	18.5		42.1	25.7		52.6	29.6			
Chronic Obstructive Pulmonary Disease	2	0.0	9.5		50.0	17.5		50.0	24.0			
Transient Cerebral Ischemia	0											
Stroke	9	77.8	20.5		88.9	27.1		88.9	31.3			
Hip Fracture	0											
Sepsis	4	50.0	40.2		50.0	49.8		50.0	55.8			
PROCEDURES:												
Angioplasty	0											
Coronary Artery Bypass Graft	0											
Initial Pacemaker Insertion	0											
Carotid Endarterectomy	0											
Hip Replacement/Reconstruction	0											
Open Reduction of Hip Fracture	0											
Prostatectomy	0											
Cholecystectomy	3	0.0	1.4		0.0	2.7		0.0	3.5			
Hysterectomy	2	0.0	1.7		0.0	3.0		0.0	4.7			

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WELLINGTON HOSPITAL

Medicare Provider Number: 170140

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at adminator	70.0	Connec	770/
Average age at admission	76.3 years	Cancer	7.7 %
Proportion female	54.6 %	Chronic cardiovascular disease	30.8 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.8 %
Referred by personal or HMO physician	73.1 %	Chronic renal disease	3.8 %
Transferred from skilled nursing facility	1.5 %	Chronic pulmonary disease	16.2 %
Admitted for elective procedure	11.5 %	Cerebrovascular degeneration	1.5 %
Admitted for emergency	1.5 %	Diabetes mellitus	9.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

3. 3. a.	83.4%	Hospital	6.3 Days
State	10.0%	State	7.3 Days
Outside State	6.6%	National	8.6 Days

Burn Unit
Comprehensive Geriatric No
Hospice Care N
Medical/Surgical Intensive Care Ye
Organ/Tissue Transplant N
Other Intensive Care N
Trauma Center N
OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Alcohol/DrugN
RehabilitationN
Psychiatric N

^{*} Not used in calculating mortality rates

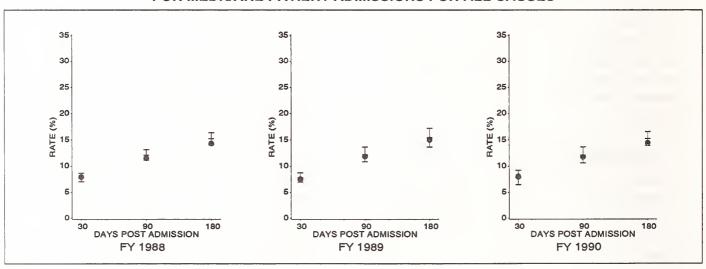
WESLEY MEDICAL CENTER
550 N HILLSIDE
WICHITA, KS 67214
Medicare Provider Number: 170123

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)									
			30 DAY	S	9	0 DAYS	3	18	0 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	4702	8.0	7.8	0.7	11.7	12.1	0.8	14.4	15.2	0.7	
CONDITIONS:											
Acute Myocardial Infarction	136	19.9	24.3	4.4	22.1	27.1	5.0	22.1	29.6	5.4	
Congestive Heart Failure	141	13.5	14.7	3.8	20.6	23.3	4.6	29.8	29.8	5.2	
Pneumonia/Influenza	127	15.7	17.5	4.4	23.6	24.5	5.4	26.8	29.0	5.2	
Chronic Obstructive Pulmonary Disease	57	15.8	8.7	4.9	29.8	15.2	8.2	35.1	20.0	8.7	
Transient Cerebral Ischemia	54	1.9	2.1	2.0	1.9	4.8	4.5	7.4	7.7	4.3	
Stroke	106	20.8	24.4	5.5	31.1	31.1	6.5	34.9	34.8	6.3	
Hip Fracture	117	11.1	6.7	5.0	12.8	12.1	3.6	17.1	16.0	3.8	
Sepsis	60	26.7	30.3	8.4	33.3	41.7	9.7	36.7	47.8	9.7	
PROCEDURES:											
Angioplasty	162	1.2	2.2	1.4	2.5	3.0	1.6	3.7	3.7	1.8	
Coronary Artery Bypass Graft	180	4.4	5.3	1.9	4.4	7.3	2.4	5.0	8.1	2.7	
Initial Pacemaker Insertion	53	0.0	1.8	2.2	0.0	3.8	3.5	1.9	5.8	4.3	
Carotid Endarterectomy	73	4.1	1.6	1.9	5.5	3.0	2.5	5.5	4.5	2.6	
Hip Replacement/Reconstruction	129	3.9	2.6	1.9	7.0	5.0	3.0	7.8	6.9	3.7	
Open Reduction of Hip Fracture	66	10.6	5.2	5.2	10.6	9.8	4.8	13.6	13.2	5.1	
Prostatectomy	133	2.3	1.1	1.2	3.8	2.7	1.6	3.8	4.6	2.1	
Cholecystectomy	77	3.9	2.2	2.3	3.9	4.4	3.1	6.5	6.1	3.3	
Hysterectomy	47	0.0	0.8		0.0	1.9		2.1	3.0		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WESLEY MEDICAL CENTER Medicare Provider Number: 170123

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

A company of a district of	70.7	0	0.00/
Average age at admission	73.7 years	Cancer	9.2 %
Proportion female	56.4 %	Chronic cardiovascular disease	29.6 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.3 %
Referred by personal or HMO physician	56.0 %	Chronic renal disease	2.4 %
Transferred from skilled nursing facility	3.4 %	Chronic pulmonary disease	10.4 %
Admitted for elective procedure	31.2 %	Cerebrovascular degeneration	4.2 %
Admitted for emergency	37.3 %	Diabetes mellitus	5.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

N:	MEDICARE AVERAGE LENGTH OF STAY:	
54.9%	Hospital	7.9 Days
41.8%	State	7.3 Days
3.3%	National	8.6 Days
100.0%		
	54.9% 41.8% 3.3%	54.9% Hospital

PROFILE:	SPECIALTY SERVICES:
Total Beds 587	Burn Unit N
Occupancy Rate 70.0 %	Cardiac Intensive Care Ye
Ownership/Control Private, For Profit	Comprehensive GeriatricYe
Medicare Discharges	Hospice Care N
Case Mix Index (CMI) 1.5824	Medical/Surgical Intensive Care Ye
STAFFING:	Organ/Tissue TransplantYe
Total Number of Physicians 427	Other Intensive Care N
Percent of Physicians Board Certified Specialists	Trauma Center Ye
-	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/Drug
Registered Nurses 657	RehabilitationYe
Licensed Practical Nurses 109	Psychiatric Ye
* Except for CMI	Medicare Swing Beds

^{*} Not used in calculating mortality rates

WICHITA COUNTY HOSPITAL

211 EAST EARL LEOTI, KS 67861 Medicare Provider Number: 170174

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				МС	ORTALIT	Y RATE	ES (%)			
		- 3	30 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	39	10.3	8.7		15.4	14.6		20.5	19.1	
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	0									
Pneumonia/Influenza	3	33.3	14.4		33.3	21.1		33.3	25.2	
Chronic Obstructive Pulmonary Disease	2	0.0	9.7		0.0	17.7		0.0	25.2	
Transient Cerebral Ischemia	2	0.0	1.3		0.0	3.5		0.0	6.4	
Stroke	0									
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	2	0.0	1.6		0.0	2.8		0.0	4.1	
Hysterectomy	0									

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

WICHITA COUNTY HOSPITAL Medicare Provider Number: 170174

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission 8	0.5 years	Cancer	12.8 %
Proportion female 5	9.0 %	Chronic cardiovascular disease	35.9 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician 9	4.9 %	Chronic renal disease	0.0 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	7.7 %
Admitted for elective procedure	5.1 %	Cerebrovascular degeneration	15.4 %
Admitted for emergency 8	37.2 %	Diabetes mellitus	10.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

MEDICARE AVERAGE LENGTH OF STAY:	
Hospital	5.8 Days
State	7.3 Days
National	8.6 Days
	Hospital

ROFILE:	SPECIALTY SERVICES:
Total Beds43	Burn Unit No
Occupancy Rate 83.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 43.2 %	Hospice Care No
Case Mix Index (CMI) 0.8644	Medical/Surgical Intensive Care No
TAFFING:	Organ/Tissue Transplant No
Total Number of Physicians1	Other Intensive Care No
Percent of Physicians Board Certified Specialists100.0 %	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns 0	Alcohol/Drug No
Registered Nurses9	Rehabilitation
Licensed Practical Nurses 0	Psychiatric N

^{*} Not used in calculating mortality rates

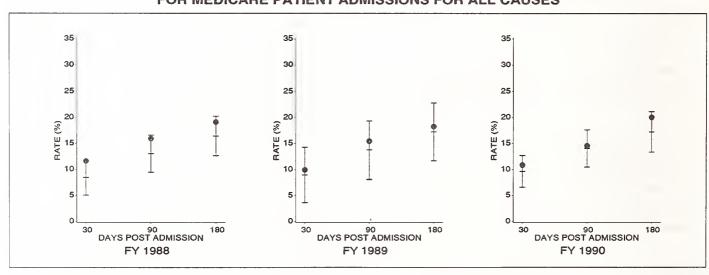
WILLIAM NEWTON MEMORIAL HOSPITAL 1300 E 5TH AVE WINFIELD, KS 67156 Medicare Provider Number: 170019

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

				MC	ORTALITY RATES (%)						
			30 DAY	s	9	0 DAYS	3	18	180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	491	10.8	9.6	1.5	14.5	14.0	1.8	20.0	17.2	2.0	
CONDITIONS:											
Acute Myocardial Infarction	14	42.9	27.6		50.0	30.5		50.0	33.2		
Congestive Heart Failure	19	15.8	17.4		21.1	26.3		31.6	32.0		
Pneumonia/Influenza	40	10.0	13.4		10.0	18.5		20.0	22.1		
Chronic Obstructive Pulmonary Disease	3	33.3	13.0		33.3	20.7		33.3	25.0		
Transient Cerebral Ischemia	5	0.0	2.6		0.0	5.3		0.0	8.4	*	
Stroke	19	36.8	21.3		42.1	28.5		52.6	32.4		
Hip Fracture	20	5.0	10.3		5.0	17.3		15.0	21.7		
Sepsis	2	0.0	30.0	*	0.0	37.3		50.0	44.9		
PROCEDURES:											
Angioplasty	0										
Coronary Artery Bypass Graft	0										
Initial Pacemaker Insertion	2	0.0	3.7		0.0	7.3		0.0	10.4		
Carotid Endarterectomy	0										
Hip Replacement/Reconstruction	10	0.0	10.0		0.0	17.4		0.0	21.9		
Open Reduction of Hip Fracture	12	8.3	7.6		8.3	13.0		25.0	16.8		
Prostatectomy	25	0.0	0.7		0.0	1.7		0.0	2.9		
Cholecystectomy	12	0.0	2.1		8.3	3.7		8.3	4.6		
Hysterectomy	9	0.0	0.1		0.0	0.3		0.0	0.6		

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WILLIAM NEWTON MEMORIAL HOSPITAL Medicare Provider Number: 170019

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission 7	6.4 years	Cancer	5.1 %
Proportion female 5	7.8 %	Chronic cardiovascular disease	43.0 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.8 %
Referred by personal or HMO physician 4	5.4 %	Chronic renal disease	6.9 %
Transferred from skilled nursing facility	1.0 %	Chronic pulmonary dlsease	15.5 %
Admitted for elective procedure 4	6.8 %	Cerebrovascular degeneration	3.5 %
Admitted for emergency	7.7 %	Diabetes mellitus	5.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:		MEDICARE AVERAGE LENGTH OF STAY:	
County/City	85.3%	Hospital	5.6 Days
State	11.0%	State	7.3 Days
Outside State	3.7%	National	8.6 Days
Total	100.0%		

Burn Unit
Comprehensive Gerlatric No
•
Hospice Care No
Medical/Surgical Intensive Care Yes
Organ/Tissue Transplant No
Other Intensive Care No
Trauma Center No
OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Alcohol/DrugNo
RehabilitationNo
Psychlatric No

^{*} Not used in calculating mortality rates

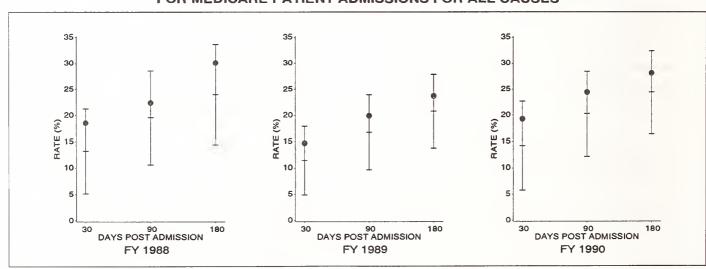
WILSON COUNTY HOSPITAL
205 MILL ST
NEODESHA, KS 66757
Medicare Provider Number: 170073

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		- ;	30 DAY	S	9	0 DAYS	3	18	0 DAYS	;
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	135	19.3	14.2	4.2	24.4	20.3	4.1	28.1	24.4	4.0
CONDITIONS:										
Acute Myocardial Infarction	6	66.7	36.7		66.7	39.3		66.7	42.0	
Congestive Heart Failure	8	25.0	12.5		37.5	20.4		37.5	27.3	
Pneumonia/Influenza	18	38.9	22.9		38.9	30.9		38.9	35.4	
Chronic Obstructive Pulmonary Disease	1	0.0	2.9		0.0	6.3		100.0	10.6	
Transient Cerebral Ischemia	3	0.0	2.2		0.0	4.9		0.0	8.4	
Stroke	2	0.0	17.2		50.0	28.0		50.0	34.5	
Hip Fracture	7	0.0	10.4		28.6	18.4		28.6	24.4	
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	2	0.0	5.6		0.0	9.6		0.0	12.2	
Open Reduction of Hip Fracture	3	0.0	13.6		66.7	26.2		66.7	34.5	
Prostatectomy	0									
Cholecystectomy	4	0.0	3.7		0.0	6.5		0.0	8.7	
Hysterectomy	3	0.0	0.1	****	0.0	0.2		0.0	0.4	

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE († 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WILSON COUNTY HOSPITAL Medicare Provider Number: 170073

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	78.2 years	Cancer	9.6 %
Proportion female	60.7 %	Chronic cardiovascular disease	38.5 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	1.5 %
Referred by personal or HMO physician	41.5 %	Chronic renal disease	3.7 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	17.0 %
Admitted for elective procedure	13.3 %	Cerebrovascular degeneration	4.4 %
Admitted for emergency	25.2 %	Diabetes mellitus	7.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

	MEDICARE AVERACE LENGTH OF STAVE	
4 :	MEDICARE AVERAGE LENGTH OF STAY:	
79.1%	Hospital	6.8 Days
19.4%	State	7.3 Days
1.5%	National	8.6 Days
100.0%		
	19.4% 1.5%	79.1% Hospital

PROFILE:	SPECIALTY SERVICES:
Total Beds	Burn Unit No
Occupancy Rate 31.0 %	Cardiac Intensive Care No
Ownership/Control Local Government	Comprehensive Geriatric No
Medicare Discharges 42.1 %	Hospice Care No
Case Mix Index (CMI) 1.2139	Medical/Surgical Intensive Care No
STAFFING:	Organ/Tissue Transplant No
Total Number of Physicians	Other Intensive Care No
Percent of Physicians Board Certified Specialists(Not Available)	Trauma Center No
	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Medical Residents/Interns0	Alcohol/Drug Yes
Registered Nurses 11	RehabilitationNo
Licensed Practical Nurses	Psychlatric No
	Medicare Swing BedsYes

^{*} Not used in calculating mortality rates

KANSAS

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

		MORTALITY RATES (%)								
		3	0 DAY	S	90	DAYS	3	180	DAYS	
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	73,224	9.1	8.9	0.1	13.6	13.5	0.3	16.7	16.9	0.3
CONDITIONS:										
Acute Myocardiai Infarction	2,226	28.3	27.0	1.0	32.2	30.2	1.6	34.2	33.0	1.3
Congestive Heart Failure	3,466	16.1	15.0	0.8	24.1	23.6	0.7	30.5	29.9	0.9
Pneumonia/influenza	4,527	15.2	15.4	0.6	21.1	21.2	0.8	24.7	25.1	1.0
Chronic Obstructive Pulmonary Disease	1,102	8.8	7.3	1.5	14.2	13.1	1.5	18.6	17.6	1.4
Transient Cerebral Ischemia	974	2.0	1.9	0.5	4.2	4.4	0.7	7.0	7.1	0.9
Stroke	2,506	21.8	20.3	1.2	28.3	26.9	1.0	32.9	30.8	1.4
Hip Fracture	2,087	7.0	6.7	0.7	11.1	11.9	1.1	14.8	15.6	1.5
Sepsis	854	22.6	25.6	1.7	31.0	33.9	2.7	35.6	38.9	3.1
PROCEDURES:										
Angioplasty	852	4.1	3.4	0.7	4.8	4.4	0.7	5.8	5.3	0.8
Coronary Artery Bypass Graft	903	6.1	5.6	0.9	8.4	7.9	1.0	9.1	8.8	1.0
initial Pacemaker Insertion	522	3.1	3.2	0.9	6.3	6.3	1.1	9.8	9.0	1.5
Carotid Endarterectomy	476	2.1	1.6	0.7	2.9	3.0	8.0	4.4	4.4	0.9
Hip Replacement/Reconstruction	1,686	3.0	3.1	0.5	5.5	5.8	1.0	7.1	7.9	1.3
Open Reduction of Hip Fracture	902	7.2	6.1	1.2	10.5	11.2	1.2	14.1	14.9	1.4
Prostatectomy	2,544	1.1	0.9	0.3	2.5	2.1	0.4	3.8	3.7	0.4
Cholecystectomy	1,358	3.7	2.5	0.7	5.2	4.6	0.7	6.8	6.2	0.8
Hysterectomy	643	0.8	0.6	0.6	0.8	1.4	0.5	2.0	2.3	1.0

^{*} The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	75.7 years	Cancer	7.1 %
Proportion female	57.3 %	Chronic cardiovascular disease	36.6 %
DMISSION SOURCES/TYPES:		Chronic liver disease	0.7 %
Referred by personal or HMO physician	51.2 %	Chronic renal disease	2.8 %
Transferred from skilled nursing facility	0.9 %	Chronic pulmonary disease	14.9 %
Admitted for elective procedure	23.7 %	Cerebrovascular degeneration	4.4 %
Admitted for emergency	23.9 %	Diabetes meilitus	6.8 %

ALL STATES

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

	MORTALITY RATES (%)										
		3	0 DAY	S	90	90 DAYS			180 DAYS		
CATEGORY	NUMBER OF CASES	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	
ALL CAUSES	6,542,299	9.0	9.0		13.9	13.7		17.3	17.1		
CONDITIONS:											
Acute Myocardial Infarction	204,673	25.3	25.6		29.5	28.7		32.1	31.4		
Congestive Heart Failure	335,426	14.3	14.4		22.9	22.8		29.2	29.0		
Pneumonia/Influenza	313,303	15.3	15.5		21.5	21.3		25.5	25.1		
Chronic Obstructive Pulmonary Disease	107,387	8.0	8.0		14.1	14.0	••••	18.7	18.5		
Transient Cerebral Ischemia	96,866	1.8	1.8		4.0	4.0		6.4	6.5		
Stroke	241,803	19.7	19.8		26.5	26.3		30.4	30.0	****	
Hip Fracture	163,386	6.7	6.5		11.7	11.5		15.1	15.0		
Sepsis	80,999	25.6	25.7	••••	34.6	33.8		39.8	38.6		
PROCEDURES:											
Angioplasty	58,026	3.0	3.0		4.0	4.0		5.0	4.9		
Coronary Artery Bypass Graft	80,798	6.0	5.7		8.3	8.1		9.5	9.2		
Initial Pacemaker Insertion	49,642	3.2	3.3		6.5	6.3		9.1	9.1		
Carotid Endarterectomy	29,990	1.6	1.5		2.8	2.8		4.0	4.1		
Hip Replacement/Reconstruction	122,156	3.4	3.2		6.2	5.9	••••	8.1	8.0		
Open Reduction of Hip Fracture	80,075	6.1	6.0		11.2	11.0		14.5	14.5		
Prostatectomy	211,087	0.9	1.0		2.2	2.3		3.7	3.8		
Cholecystectomy	124,259	2.9	2.7		5.0	4.9		6.5	6.5		
Hysterectomy	53,905	0.7	0.7		1.4	1.5		2.2	2.4		

^{*} The Standard Deviation (SD) is not calculated.

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

Average age at admission	74.1 vears	Cancer	7.6 %
Proportion female	•	Chronic cardiovascular disease	36.6 %
·	JJ.J /0		
DMISSION SOURCES/TYPES:		Chronic liver disease	1.0 %
Referred by personal or HMO physician	46.1 %	Chronic renal disease	3.4 %
Transferred from skilled nursing facility	1.1 %	Chronic pulmonary disease	15.0 %
Admitted for elective procedure	22.0 %	Cerebrovascular degeneration	3.9 %
Admitted for emergency	46.5 %	Diabetes mellitus	8.0 %



Hospital Comments



March 16, 1992

Medicare Provider #: 170087

Gail R. Wilensky, Ph.D., Administrator Health Care Financing Administration Medicare Hospital Information Bureau of Data Management & Strategy Room 3-A-12, Security Office Park Bldg. 6325 Security Blvd. Baltimore, Maryland 21207-5187 ATTN: Robert Moore

We have received and reviewed our FY'90 Medicare Hospital Mortality Rate information. As a result of our review of your data, we decided to review the clinical charts of the deaths that occurred under one "Conditions" category (Chronic Obstructive Pulmonary Disease) and one "Procedures" category (Cholecystectomy) since the data would suggest that our observed mortality rates in these two areas were significantly higher than predicted. Our comments are primarily in regards to the misleading information that is published as a result of your study methodology.

There is no question that good outcome data is important in continuous quality improvement efforts. Mortality rates are one such outcome measure, but like many outcome measures it needs to be severity adjusted to have any validity. It appears as though HCFA is moving in that direction but it is not clear whether this data is severity adjusted or not. Our Agrigate data shows that our Medical Center is well within the normal range for mortality rates, but we were concerned that the data suggest that we have higher than expected mortality rates in the area of GOPD and Cholecystectomy. We found this more focused date to be inaccurate and misleading.

The data in regards to Chronic Obstructive Pulmonary Disease reflected that there were thirteen deaths in patients aged 64-98. A review of the patients' records revealed that six did not die at St. Joseph Medical Center and cause of death was unknown. Of the five deaths that there were clearly known causes, those causes were as follows:

Reral cel carcinoma; post-thoracotomy for pulmonary hemorrhage; metastatic carcinoma (primary unknown); post-operative ARDS; and cardiac death.

A review of cholecystectomy revealed that there were ten deaths in patients aged 68-93. Three of these deaths did not occur at St. Joseph Medical Center and cause of death was unknown. In five of these cases the cholecystectomy was not even the primary surgical

Gail R. Wilensky, Ph.D., Administrator Health Care Financing Administration Medicare Hospital Information ATTN: Robert Moore March 16, 1992 Page 2 Medicare Provider #: 170087

procedure and was not even listed as such in the clinical information. Of the five cases where the cholecystectomy was the primary surgery, one death occurred during the same hospitalization secondary to complications, and one death occurred in the nursing home one month after discharge. The three other cases recovered from their cholecystectomy and died of other causes. Of the six known causes of death among this group of patients, the following was found: Ruptured abdominal aortic aneurism, pancreatic carcinoma (two cases), intracranial hemorrhage during a subsequent hospitalization, ischemic enterocolitis; and bowel necrosis and peritonitis.

This type of data inconsistency is similar to what we found last year in reviewing our HCFA mortality data, and once again calls in to question the methodology of attribution in regards to mortality rates for specific conditions or procedures. The system of attributing deaths, especially those deaths that occur outside the hospital, to a random hospitalization during the previous year obviously creates some serious validity problems in terms of your attribution data. If this attribution methodology had any validity it would have led us to information that would have been useful in terms of quality improvement in our institution. Instead it caused us to utilize a significant amount of staff time only to uncover the inconsistencies. Such inconsistencies in your methodology would also once again raise the questions of the validity of your overall data and the usefulness of it to the institutions.

Sincerely yours,

de Roy Rheart

LeRoy Rheault

CEO, St. Joseph Medical Center

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